

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

IOWA DEMOCRATIC PARTY

ADDRESS (number and street)

5661 Fleur Drive

☐Check if different  
than previously  
reported. (ACC)

Des Moines

IA

50321

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00035600

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

08

01

2004

through

08

31

2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Ken Sagar

Signature of Treasurer

Electronically Filed by Ken Sagar

Date

07

19

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
IOWA DEMOCRATIC PARTY

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	0	4

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	0	4

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>Y Y Y Y</span> <span>2004</span>		166393.81
(b) Cash on Hand at Beginning of Reporting Period .....	126734.70	
(c) Total Receipts (from Line 19) .....	354914.32	1534022.77
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	481649.02	1700416.58
7. Total Disbursements (from Line 31) .....	386893.78	1605661.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	94755.24	94755.24
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	1200.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

IOWA DEMOCRATIC PARTY

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	0	4

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	0	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	70789.00	376821.17
(i) Itemized (use Schedule A) .....	16455.64	288545.16
(ii) Unitemized .....	87244.64	665366.33
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	15630.00	101744.24
(c) Other Political Committees (such as PACs) .....	102874.64	767110.57
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	181770.65	431436.10
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	150.00	3825.06
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	39687.72	195364.95
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	30431.31	136286.09
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	30431.31	136286.09
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	354914.32	1534022.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	324483.01	1397736.68

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	26888.78	145412.18
(i) Federal Share.....		
(ii) Non-Federal Share.....	47803.70	257042.34
(b) Other Federal Operating Expenditures.....	55614.00	93948.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	130306.48	496403.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	2565.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	120.00	19620.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	120.00	19620.00
29. Other Disbursements.....	640.00	452825.90
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	717.02
(ii) "Levin" Share .....	0.00	1274.72
(b) Federal Election Activity Paid Entirely With Federal Funds .....	255827.30	632255.29
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	255827.30	634247.03
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	386893.78	1605661.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	339090.08	1347344.28

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	102874.64	767110.57
34. Total Contribution Refunds (from Line 28(d)) .....	120.00	19620.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	102754.64	747490.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	82502.78	239361.07
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	150.00	3825.06
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	82352.78	235536.01

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)

Robert E Dvorsky

Mailing Address 412 6th Street

City State Zip Code  
Coralville IA 52241-2511

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
State of Iowa

Occupation  
State Senator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 0 4

Transaction ID: C3916

Amount of Each Receipt this Period

67.00

**B.** Full Name (Last, First, Middle Initial)

Mary M Hansen

Mailing Address 5210 Tamara Pt

City State Zip Code  
Panora IA 50216-8611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
State of Iowa

Occupation  
Director of Iowa Public Health Dept.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 9 / 2 0 0 4

Transaction ID: C3677

Amount of Each Receipt this Period

240.00

**C.** Full Name (Last, First, Middle Initial)

Adele L Bates

Mailing Address 3706 E 28th St

City State Zip Code  
Des Moines IA 50317-4222

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 0 4

Transaction ID: C3713

Amount of Each Receipt this Period

240.00

**SUBTOTAL** of Receipts This Page (optional) .....

547.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
 Iftekhar A Shareef  
 Mailing Address 7227 N Kenneth Ave

City State Zip Code  
 Lincolnwood IL 60712-1804

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
National Bank Card Co

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 3 1 / 2 0 0 4

Transaction ID: C3917

Amount of Each Receipt this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
 Michael G Gartner

Mailing Address 100 Market St  
 Unit 515

City State Zip Code  
 Des Moines IA 50309-4766

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Businessman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 7 / 2 0 0 4

Transaction ID: C3866

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
 James H Drees

Mailing Address 15485 280th St

City State Zip Code  
 Manning IA 51455-8668

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 3 0 / 2 0 0 4

Transaction ID: C3885

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional) .....

7400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
Cecilia J. Tomlonovic

Mailing Address 1245 40th St

City State Zip Code  
Des Moines IA 50311-2511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Family Planning Council

Occupation  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 2 / 2 0 0 4

Transaction ID: C3635

Amount of Each Receipt this Period

400.00

**B.** Full Name (Last, First, Middle Initial)  
Bonnie Kay Barry

Mailing Address 818 SE Rio Cir

City State Zip Code  
Ankeny IA 50021-3655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Des Moines Area Community  
College

Occupation  
Adjunct Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 7 / 2 0 0 4

Transaction ID: C3863

Amount of Each Receipt this Period

240.00

**C.** Full Name (Last, First, Middle Initial)  
Robert Bradley Skinner

Mailing Address 1810 Andrews Dr

City State Zip Code  
Pleasant Hill IA 50327-0910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Skinner Law Firm

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3336.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 7 / 2 0 0 4

Transaction ID: C66578

Amount of Each Receipt this Period

417.00

**SUBTOTAL** of Receipts This Page (optional) .....

1057.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Elizabeth Ann Christiansen

Mailing Address 302 Morningside Dr

City State Zip Code  
 Iowa City IA 52245-4663

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Iowa Dept of Natural Resources

Occupation  
Deputy Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 2 / 2 0 0 4

Transaction ID: C62409

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Thomas G Carsner

Mailing Address 1627 College Court PI

City State Zip Code  
 Iowa City IA 52245-4417

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American College Testing

Occupation  
Editor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 7 / 2 0 0 4

Transaction ID: C3873

Amount of Each Receipt this Period

200.00

C. Full Name (Last, First, Middle Initial)

Lois H Eichacker

Mailing Address 2330 Harper Ln

City State Zip Code  
 Fort Madison IA 52627-9520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 5 / 2 0 0 4

Transaction ID: C3817

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

700.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. James W Hubbell, Jr.

Mailing Address 6900 Westown Parkway

City State Zip Code  
Des Moines IA 50312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 1 / 2 0 0 4

Transaction ID: C66574

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Larry Dean Bartlett

Mailing Address 2688 Hidden Valley Trl NE

City State Zip Code  
Solon IA 52333-9689

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Iowa

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 0 4

Transaction ID: C3663

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. Charles Carroll

Mailing Address 2776 Turkey Creek Ln NE

City State Zip Code  
Iowa City IA 52240-7846

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mercy Tipton

Occupation  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 8 / 2 0 0 4

Transaction ID: C62475

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

3500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Marilyn E Brubaker

Mailing Address 4987 Oriole Ave

City State Zip Code  
 Germantown IA 51046-7599

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 3 0 / 2 0 0 4

Transaction ID: C3906

Amount of Each Receipt this Period

20.00

B. Full Name (Last, First, Middle Initial)

Marilyn E Brubaker

Mailing Address 4987 Oriole Ave

City State Zip Code  
 Germantown IA 51046-7599

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 3 0 / 2 0 0 4

Transaction ID: C3887

Amount of Each Receipt this Period

400.00

C. Full Name (Last, First, Middle Initial)

Jean Y Jew

Mailing Address 3973 Stewart Rd NE

City State Zip Code  
 Iowa City IA 52240-7983

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Iowa

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 2 / 2 0 0 4

Transaction ID: C3636

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

1420.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Florence D Buhr		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 4
Mailing Address 4127 30th St		<b>Transaction ID:</b> C3877
City Des Moines	State IA	Zip Code 50310-5946
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Roxanne B Conlin		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 4
Mailing Address 2900 Southern Hills Circle		<b>Transaction ID:</b> C3824
City Des Moines	State IA	Zip Code 50321-1458
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2251.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Roxanne B Conlin		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 4
Mailing Address 2900 Southern Hills Circle		<b>Transaction ID:</b> C3878
City Des Moines	State IA	Zip Code 50321-1458
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 417.00
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2251.00	

**SUBTOTAL** of Receipts This Page (optional) .....

1517.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Romaine Henry Foege		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 4	
Mailing Address PO Box 128 507 B Washington Ct		<b>Transaction ID:</b> C3716	
City State Zip Code Mount Vernon IA 52314-0128		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer State of Iowa		Occupation State Legislator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 810.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Jean Haugland		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 4	
Mailing Address 6750 School St Unit 1402		<b>Transaction ID:</b> C3644	
City State Zip Code Windsor Heights IA 50311-1651		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 825.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Mary Anna Gaskill		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 0 / 2 0 0 4	
Mailing Address 509 E 4th St		<b>Transaction ID:</b> C62477	
City State Zip Code Ottumwa IA 52501-3011		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer State of Iowa		Occupation State Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 915.00	

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Barbara S Appleby

Mailing Address 10163 NW 102nd St

City State Zip Code  
 Clive IA 50325-6770

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mercy Medical Center

Occupation  
Social Worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 4 / 2 0 0 4

Transaction ID: C62410

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Mary Patricia Maloney

Mailing Address 3415 Witmer Pkwy

City State Zip Code  
 Des Moines IA 50310-4434

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Polk County IA

Occupation  
Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 7 / 2 0 0 4

Transaction ID: C3879

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. Angelyn M King

Mailing Address 1361 72nd St

City State Zip Code  
 Windsor Heights IA 50311-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Iowa State Education Association

Occupation  
Political Action Coord.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 9 / 2 0 0 4

Transaction ID: C3764

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

510.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Charles G Davidson

Mailing Address 26A Parker St

City

Lexington

State

MA

Zip Code

02421-4907

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lafayette Development III  
LLC

Occupation

Venture Capitalist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 0 4

Transaction ID: C3921

Amount of Each Receipt this Period

10000.00

B. Full Name (Last, First, Middle Initial)

James W Hubbell, III

Mailing Address 3022 Fox Run

City

Des Moines

State

IA

Zip Code

50321

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hubbell Realty

Occupation

Realtor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 6 / 2 0 0 4

Transaction ID: C3736

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)

James Arthur Autry

Mailing Address 5007 Woodland Ave

City

Des Moines

State

IA

Zip Code

50312-1939

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Consultant/Author

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 9 / 2 0 0 4

Transaction ID: C3766

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) .....

15300.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. John M Kuster

Mailing Address 2418 Silverwood Ln

City State Zip Code  
 Fairfield IA 52556-8626

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rescare, Inc

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 7 / 2 0 0 4

Transaction ID: C3861

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

B. George Eichacker

Mailing Address 2330 Harper Ln

City State Zip Code  
 Fort Madison IA 52627-9520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 5 / 2 0 0 4

Transaction ID: C3816

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Greg A Lewis

Mailing Address 1816 E 22nd St

City State Zip Code  
 Des Moines IA 50317-6304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 9 / 2 0 0 4

Transaction ID: C3763

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

3300.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**IOWA DEMOCRATIC PARTY**

**A.** Full Name (Last, First, Middle Initial)  
 Gerald David Hurd

Mailing Address 300 Walnut Street  
 Unit 183

City State Zip Code  
 Des Moines IA 50309-2244

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 Retired

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10014.67

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 7 / 2 0 0 4

Transaction ID: C3671

Amount of Each Receipt this Period

2900.00

**B.** Full Name (Last, First, Middle Initial)  
 Gerald David Hurd

Mailing Address 300 Walnut Street  
 Unit 183

City State Zip Code  
 Des Moines IA 50309-2244

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 Retired

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10014.67

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 0 / 2 0 0 4

Transaction ID: C62480

Amount of Each Receipt this Period

2100.00

**C.** Full Name (Last, First, Middle Initial)  
 Gerald David Hurd

Mailing Address 300 Walnut Street  
 Unit 183

City State Zip Code  
 Des Moines IA 50309-2244

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 Retired

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10014.67

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 7 / 2 0 0 4

Transaction ID: C3867

Amount of Each Receipt this Period

417.00

**SUBTOTAL** of Receipts This Page (optional) .....

5417.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**IOWA DEMOCRATIC PARTY**

Full Name (Last, First, Middle Initial)

**A. Joanne Stevens**

Mailing Address **365 Trailridge Rd SE**

City State Zip Code  
**Cedar Rapids IA 52403-2009**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Iowa Reality**

Occupation  
**Realtor**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**08 / 10 / 2004**

Transaction ID: **C3687**

Amount of Each Receipt this Period

**250.00**

Full Name (Last, First, Middle Initial)

**B. Howard Louis Hoy**

Mailing Address **2624 Boyd St**

City State Zip Code  
**Des Moines IA 50317-6014**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Internal Revenue Service**

Occupation  
**Revenue Officer**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**750.00**

Date of Receipt

**08 / 02 / 2004**

Transaction ID: **C3631**

Amount of Each Receipt this Period

**750.00**

Full Name (Last, First, Middle Initial)

**C. Lewis F Weinberg**

Mailing Address **3905 Country Club Blvd**

City State Zip Code  
**Sioux City IA 51104-1329**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Weinberg Investment Inc**

Occupation  
**Real Estate**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**08 / 10 / 2004**

Transaction ID: **C3701**

Amount of Each Receipt this Period

**1000.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**2000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

James F O'Halloran

Mailing Address 3303 Beaver Ave

City State Zip Code  
 Des Moines IA 50310-3209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 7 / 2 0 0 4

Transaction ID: C3853

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)

Mrs Gertrude Macqueen

Mailing Address 454 Lexington Ave

City State Zip Code  
 Iowa City IA 52246-2417

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 7 / 2 0 0 4

Transaction ID: C3870

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)

Paul J McAndrew, Jr.

Mailing Address 2590 Holiday Rd - Suite 100

City State Zip Code  
 Coralville IA 52241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Paul McAndrew Law Firm

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 3 / 2 0 0 4

Transaction ID: C3785

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional) .....

1040.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**IOWA DEMOCRATIC PARTY**

**A.** Full Name (Last, First, Middle Initial)  
James Andrew Erb

Mailing Address 701 2nd Ave

City State Zip Code  
**Charles City IA 50616-3022**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 8 / 2 5 / 2 0 0 4**

Transaction ID: C3813

Amount of Each Receipt this Period

400.00

**B.** Full Name (Last, First, Middle Initial)

John L Tait

Mailing Address 2434 Hamilton Dr

City State Zip Code  
**Ames IA 50014-8202**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ISU

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 8 / 0 4 / 2 0 0 4**

Transaction ID: C3655

Amount of Each Receipt this Period

400.00

**C.** Full Name (Last, First, Middle Initial)

Robert G Allbee

Mailing Address 3519 Oak Creek Pl

City State Zip Code  
**West Des Moines IA 50265-7965**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ABCM Corp

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 8 / 2 7 / 2 0 0 4**

Transaction ID: C3852

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 239

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Christine N Barry Mailing Address 138 W Lincoln Ave City State Zip Code Libertyville IL 60048-2721 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 4 <b>Transaction ID: C3737</b> Amount of Each Receipt this Period 250.00
Name of Employer Occupation Homemaker Homemaker Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Patricia Hutchings Heidenreich Mailing Address PO Box 37 City State Zip Code Marquette IA 52158-0037 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 4 <b>Transaction ID: C3850</b> Amount of Each Receipt this Period 260.00
Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 260.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Richard B Margulies Mailing Address 2100 Westown Pkwy Ste 220 City State Zip Code West Des Moines IA 50265-1539 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 4 <b>Transaction ID: C3883</b> Amount of Each Receipt this Period 2500.00
Name of Employer Occupation Self Employed Attorney Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2500.00		

**SUBTOTAL** of Receipts This Page (optional) .....

3010.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 239

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Holmes Foster Mailing Address 13621 Bay Hill Dr City State Zip Code Des Moines IA 50325-8565 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 8500.00		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 4 <b>Transaction ID: C3682</b> Amount of Each Receipt this Period 2500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Brent Calvin Wynja Mailing Address 1012 Hunziker Dr City State Zip Code Ames IA 50010-5028 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Solomon, Smith, Barney Occupation VP-Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 720.00		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 4 <b>Transaction ID: C3936</b> Amount of Each Receipt this Period 20.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mary Jane Pollack Mailing Address 1300 N Lake Shore Dr City State Zip Code Chicago IL 60610-2157 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 4 <b>Transaction ID: C3918</b> Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3520.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Harriet Hubbell Edwards Mailing Address 2300 Terrace Rd City State Zip Code Des Moines IA 50312-5430 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 4 <b>Transaction ID: C3783</b> Amount of Each Receipt this Period 2500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Jean M Davis Mailing Address 3832 Park Avenue City State Zip Code Des Moines IA 50321-1345 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation State of Iowa Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 4 <b>Transaction ID: C3865</b> Amount of Each Receipt this Period 240.00
<b>C.</b> Full Name (Last, First, Middle Initial) Swati Arvind Dandekar Mailing Address 2731 28th Ave City State Zip Code Marion IA 52302-1341 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation State of Iowa Representative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 850.00		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 4 <b>Transaction ID: C3932</b> Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) .....

2790.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**IOWA DEMOCRATIC PARTY**

**A.** Full Name (Last, First, Middle Initial)  
Philip Allen Specht

Mailing Address 28304 Pleasant Ridge Rd

City State Zip Code  
**Mc Gregor IA 52157-8700**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 8 / 2 7 / 2 0 0 4**

Transaction ID: C3851

Amount of Each Receipt this Period

260.00

**B.** Full Name (Last, First, Middle Initial)

Jo Ellen Whitney

Mailing Address 53 Meadowbrook Cir

City State Zip Code  
**Cumming IA 50061-1014**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Davis Brown & Koehn

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 8 / 0 2 / 2 0 0 4**

Transaction ID: C3603

Amount of Each Receipt this Period

400.00

**C.** Full Name (Last, First, Middle Initial)

Kathleen Brigid Halloran

Mailing Address 825 17th Street SE

City State Zip Code  
**Cedar Rapids IA 52403-2609**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
City of Cedar Rapids

Occupation  
Mayor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4336.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 8 / 0 6 / 2 0 0 4**

Transaction ID: C3664

Amount of Each Receipt this Period

417.00

**SUBTOTAL** of Receipts This Page (optional) .....

**1077.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Kathleen Brigid Halloran		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 4
Mailing Address 825 17th Street SE		<b>Transaction ID:</b> C3875
City Cedar Rapids	State IA	Zip Code 52403-2609
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 417.00
Name of Employer City of Cedar Rapids	Occupation Mayor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4336.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Jeffrey P Berg		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 4
Mailing Address 5021 Duffy Dr NE Ste B		<b>Transaction ID:</b> C3815
City Cedar Rapids	State IA	Zip Code 52402-2016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Junius C Brenton		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 4
Mailing Address 1400 Windover Rd		<b>Transaction ID:</b> C3849
City Des Moines	State IA	Zip Code 50315-2135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00	

**SUBTOTAL** of Receipts This Page (optional) .....

5657.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**IOWA DEMOCRATIC PARTY**

**A.** Full Name (Last, First, Middle Initial)  
 Carol H Dillard

Mailing Address 405 S 3rd St W

City State Zip Code  
 Mount Vernon IA 52314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Mt. Vernon Bank & Trust

Occupation  
 Bank Marketer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 3 / 2 0 0 4

Transaction ID: C3790

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Sally J Pederson

Mailing Address 5007 Woodland Ave

City State Zip Code  
 Des Moines IA 50312-1939

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 State of Iowa

Occupation  
 Lt Governor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 3 0 / 2 0 0 4

Transaction ID: C3902

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)

Cynthia Forbes

Mailing Address 15215 Alpine Drive

City State Zip Code  
 Urbandale IA 50323

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Polk County

Occupation  
 Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 3 0 / 2 0 0 4

Transaction ID: C3912

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

5270.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) James Quilty Mailing Address 814 17th St City Des Moines State IA Zip Code 50314-1126 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Crawford Law Firm Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 08 / 30 / 2004 <b>Transaction ID: C3882</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Marilyn Ruth Kirkpatrick Mailing Address PO Box 112 604 Knotts Street City New Virginia State IA Zip Code 50210-0112 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Mercy Hospital Occupation Medical Coder Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt MM / DD / YYYY 08 / 05 / 2004 <b>Transaction ID: C3656</b> Amount of Each Receipt this Period 240.00
<b>C.</b> Full Name (Last, First, Middle Initial) Margaret Ritchie Mailing Address 1927 Hilton Dr City Cedar Falls State IA Zip Code 50613-6439 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Chrystalis Foundation Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 08 / 01 / 2004 <b>Transaction ID: C3586</b> Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) .....

740.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**IOWA DEMOCRATIC PARTY**

**A.** Full Name (Last, First, Middle Initial)  
 Thomas G Mortenson  
 Mailing Address 723 Fox Run Dr

City State Zip Code  
Oskaloosa IA 52577-4140

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Post Secondary

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 3 0 / 2 0 0 4

Transaction ID: C3886

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
 Bruce L Braley  
 Mailing Address 247 Sheridan Rd

City State Zip Code  
Waterloo IA 50701-4021

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Dutton, Braun, Staack, &  
Hellman

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 6 / 2 0 0 4

Transaction ID: C3662

Amount of Each Receipt this Period

1250.00

**C.** Full Name (Last, First, Middle Initial)  
 Alfredo G Parrish  
 Mailing Address 17 32nd Place

City State Zip Code  
Des Moines IA 50312-4522

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Parrish Law Firm

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 7 / 2 0 0 4

Transaction ID: C3871

Amount of Each Receipt this Period

417.00

**SUBTOTAL** of Receipts This Page (optional) .....

2667.00

**TOTAL** This Period (last page this line number only) .....

70789.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)  
**IOWA DEMOCRATIC PARTY**

Full Name (Last, First, Middle Initial)  
**A. Association of Trial Lawyers of America PAC**  
 Mailing Address **1814 N St NW**

City State Zip Code  
**Washington DC 20036**

FEC ID number of contributing  
federal political committee. **C C00024521**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt

**08 / 31 / 2004**

Transaction ID: C66582

Amount of Each Receipt this Period

**5000.00**

Full Name (Last, First, Middle Initial)  
**B. NEA FUND FOR CHILDREN AND PUBLIC EDUCATION**  
 Mailing Address **1201 16th St NW Ste 420**

City State Zip Code  
**Washington DC 20036**

FEC ID number of contributing  
federal political committee. **C C00003251**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt

**08 / 19 / 2004**

Transaction ID: C3958

Amount of Each Receipt this Period

**5000.00**

Full Name (Last, First, Middle Initial)  
**C. PAUL JOHNSON FOR CONGRESS**  
 Mailing Address **PO Box 475**

City State Zip Code  
**Decorah IA 52101-0475**

FEC ID number of contributing  
federal political committee. **C C00399774**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**15130.00**

Date of Receipt

**08 / 16 / 2004**

Transaction ID: C3943

Amount of Each Receipt this Period

**50.00**

Transfer

**SUBTOTAL** of Receipts This Page (optional) .....

**10050.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**IOWA DEMOCRATIC PARTY**

**A.** Full Name (Last, First, Middle Initial)  
**PAUL JOHNSON FOR CONGRESS**

Mailing Address **PO Box 475**

City State Zip Code  
**Decorah IA 52101-0475**

FEC ID number of contributing  
federal political committee. **C C00399774**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**15130.00**

Date of Receipt

**08 / 30 / 2004**

**Transaction ID: C3922**

Amount of Each Receipt this Period

**5000.00**

Transfer

**B.** Full Name (Last, First, Middle Initial)

**PAUL JOHNSON FOR CONGRESS**

Mailing Address **PO Box 475**

City State Zip Code  
**Decorah IA 52101-0475**

FEC ID number of contributing  
federal political committee. **C C00399774**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**15130.00**

Date of Receipt

**08 / 30 / 2004**

**Transaction ID: C3952**

Amount of Each Receipt this Period

**80.00**

Transfer

**C.** Full Name (Last, First, Middle Initial)

**JULIE THOMAS FOR CONGRESS CAMPAIGN COMMITTEE**

Mailing Address **PO Box 2816**

City State Zip Code  
**Cedar Rapids IA 52406**

FEC ID number of contributing  
federal political committee. **C C00370965**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**08 / 19 / 2004**

**Transaction ID: C62481**

Amount of Each Receipt this Period

**500.00**

Transfer

**SUBTOTAL** of Receipts This Page (optional) .....

**5580.00**

**TOTAL** This Period (last page this line number only) .....

**15630.00**

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Democratic National Committee - State Victory Fund

Mailing Address 430 S Capitol St SE

City State Zip Code  
 Washington DC 20003-4024

FEC ID number of contributing  
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275005.10

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 6 / 2 0 0 4

Transaction ID: C3925

Amount of Each Receipt this Period

7916.49

Full Name (Last, First, Middle Initial)

**B.** Democratic National Committee - State Victory Fund

Mailing Address 430 S Capitol St SE

City State Zip Code  
 Washington DC 20003-4024

FEC ID number of contributing  
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275005.10

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 6 / 2 0 0 4

Transaction ID: C3926

Amount of Each Receipt this Period

5901.45

Full Name (Last, First, Middle Initial)

**C.** Democratic National Committee - State Victory Fund

Mailing Address 430 S Capitol St SE

City State Zip Code  
 Washington DC 20003-4024

FEC ID number of contributing  
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275005.10

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 3 / 2 0 0 4

Transaction ID: C3927

Amount of Each Receipt this Period

66280.45

**SUBTOTAL** of Receipts This Page (optional) .....

80098.39

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☒ 12  
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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
Democratic National Committee - State Victory Fund

Mailing Address 430 S Capitol St SE

City State Zip Code  
Washington DC 20003-4024

FEC ID number of contributing  
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
275005.10

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 0 4

Transaction ID: C3928

Amount of Each Receipt this Period

86522.26

**B.** Full Name (Last, First, Middle Initial)  
Dollars for Democrats

Mailing Address 430 S Capitol St SE

City State Zip Code  
Washington DC 20003-4024

FEC ID number of contributing  
federal political committee. **C** C00073791

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
145000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 2 / 2 0 0 4

Transaction ID: C3924

Amount of Each Receipt this Period

15000.00

**C.** Full Name (Last, First, Middle Initial)  
Boone County Democratic Central Committee

Mailing Address 179 Nature Road

City State Zip Code  
Boone IA 50036

FEC ID number of contributing  
federal political committee. **C**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 0 / 2 0 0 4

Transaction ID: C66579

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

101672.26

**TOTAL** This Period (last page this line number only) .....

181770.65



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
 Story County Democratic Central Committee

Mailing Address 2800 Pinehurst Cir

City State Zip Code  
 Ames IA 50010-4562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1240.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 3 0 / 2 0 0 4

Transaction ID: C66581

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Mark Smith for Iowa House Mailing Address 816 Roberts Terrace City Marshalltown State IA Zip Code 50158 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 08 / 19 / 2004 <b>Transaction ID: C3769</b> Amount of Each Receipt this Period 500.00 Voter File Purchase
<b>B.</b> Full Name (Last, First, Middle Initial) Citizens for Kuhn Mailing Address 2667 240th Street City Charles City State IA Zip Code 50616 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 08 / 19 / 2004 <b>Transaction ID: C3772</b> Amount of Each Receipt this Period 500.00 Voter File Purchase
<b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect John Whitaker Mailing Address 32500 145th St City Hillsboro State IA Zip Code 52630-8004 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 08 / 27 / 2004 <b>Transaction ID: C3948</b> Amount of Each Receipt this Period 500.00 Voter File Purchase

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 239

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Jim Lykam		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 4
Mailing Address 2906 W 35th Street		<b>Transaction ID:</b> C3768
City Davenport	State IA	Zip Code 52806
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		Voter File Purchase

<b>B.</b> Full Name (Last, First, Middle Initial) Peterson for State Representative		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 4
Mailing Address 1346 47th St		<b>Transaction ID:</b> C3941
City Des Moines	State IA	Zip Code 50311-2404
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		Voter File Purchase

<b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Bruce Hunter		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 4
Mailing Address 452 Wilmers Avenue		<b>Transaction ID:</b> C3949
City Des Moines	State IA	Zip Code 50315
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		Voter File Purchase

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 239

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Gaskill for State Representative

Mailing Address 509 E. 4th Street

City State Zip Code  
Ottumwa IA 52501

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 20 2004

Transaction ID: C3944

Amount of Each Receipt this Period

500.00

Voter File Purchase

Full Name (Last, First, Middle Initial)

**B.** IOWA STATE EDUCATION ASSOCIATION

Mailing Address 777 3RD ST

City State Zip Code  
DES MOINES IA 50309

FEC ID number of contributing  
federal political committee.

**C** C70000997

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 17 2004

Transaction ID: C3962

Amount of Each Receipt this Period

25000.00

Voter File Access

Full Name (Last, First, Middle Initial)

**C.** Brian Quirk for State Representative

Mailing Address 1011 Sunset

City State Zip Code  
New Hampton IA 50659

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 15 2004

Transaction ID: C3715

Amount of Each Receipt this Period

500.00

Voter File Purchase

**SUBTOTAL** of Receipts This Page (optional) .....

26000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 239

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
Polly Bukta Campaign Committee

Mailing Address 604 S 32nd Street

City State Zip Code  
 Clinton IA 52732

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 7 / 2 0 0 4

Transaction ID: C3947

Amount of Each Receipt this Period

500.00

Voter File Purchase

**B.** Full Name (Last, First, Middle Initial)  
Waterman for State Senate

Mailing Address PO Box 273

City State Zip Code  
 Osceola IA 50213-0273

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 9 / 2 0 0 4

Transaction ID: C3940

Amount of Each Receipt this Period

500.00

Voter File Purchase

**C.** Full Name (Last, First, Middle Initial)  
Taylor for Representative

Mailing Address 1416 A Avenue NW

City State Zip Code  
 Cedar Rapids IA 52405-4834

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 9 / 2 0 0 4

Transaction ID: C3773

Amount of Each Receipt this Period

500.00

Voter File Purchase

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 239

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)  
**IOWA DEMOCRATIC PARTY**

**A.** Full Name (Last, First, Middle Initial)  
 State of Iowa

Mailing Address State Capitol

City State Zip Code  
**Des Moines IA 50319**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2004

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**74308.52**

Date of Receipt

M M / D D / Y Y Y Y  
**0 8 / 0 3 / 2 0 0 4**

**Transaction ID: C64388**

Amount of Each Receipt this Period

**2753.25**

**B.** Full Name (Last, First, Middle Initial)

Reasoner for State Representative

Mailing Address 702 New York Avenue

City State Zip Code  
**Creston IA 50801**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

M M / D D / Y Y Y Y  
**0 8 / 1 7 / 2 0 0 4**

**Transaction ID: C3743**

Amount of Each Receipt this Period

**500.00**

Voter File Purchase

**C.** Full Name (Last, First, Middle Initial)

National Motor Club

Mailing Address 6500 Beltline Rd - Suite 200

City State Zip Code  
**Irving TX 75063**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**4105.31**

Date of Receipt

M M / D D / Y Y Y Y  
**0 8 / 1 6 / 2 0 0 4**

**Transaction ID: C3942**

Amount of Each Receipt this Period

**434.47**

**SUBTOTAL** of Receipts This Page (optional) .....

**3687.72**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 239

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)  
**IOWA DEMOCRATIC PARTY**

**A.** Full Name (Last, First, Middle Initial)

Wise Voters

Mailing Address 503 Grand Avenue

City State Zip Code  
**Keokuk IA 52632**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 8 / 1 7 / 2 0 0 4**

**Transaction ID: C3742**

Amount of Each Receipt this Period

500.00

Voter File Purchase

**B.** Full Name (Last, First, Middle Initial)

Mertz for Representative

Mailing Address 607 110th Street

City State Zip Code  
**Ottosen IA 50570-8504**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 8 / 2 0 / 2 0 0 4**

**Transaction ID: C3945**

Amount of Each Receipt this Period

500.00

Voter File Purchase

**C.** Full Name (Last, First, Middle Initial)

People for Pam Jochum

Mailing Address 2368 Jackson St

City State Zip Code  
**Dubuque IA 52001-3525**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 8 / 2 7 / 2 0 0 4**

**Transaction ID: C3946**

Amount of Each Receipt this Period

500.00

Voter File Purchase

**SUBTOTAL** of Receipts This Page (optional) .....

**1500.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 239

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
Swaim for House  
Mailing Address 504 North Davis

City State Zip Code  
Bloomfield IA 52537

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 0 / 2 0 0 4

Transaction ID: C3951

Amount of Each Receipt this Period

500.00

Voter File Purchase

**B.** Full Name (Last, First, Middle Initial)  
Friends for Russ Wiesley  
Mailing Address 732 Dartmoor Dr

City State Zip Code  
Waukee IA 50263-9708

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 2 / 2 0 0 4

Transaction ID: C3934

Amount of Each Receipt this Period

500.00

Voter File Purchase

**C.** Full Name (Last, First, Middle Initial)  
Friends for Russ Wiesley  
Mailing Address 732 Dartmoor Dr

City State Zip Code  
Waukee IA 50263-9708

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 4

Transaction ID: C3960

Amount of Each Receipt this Period

1000.00

Voter File Purchase

SUBTOTAL of Receipts This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 239

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Sextro for Senate

Mailing Address 1106 E Ave East

City State Zip Code  
 Albia IA 52531

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 7 / 2 0 0 4

Transaction ID: C3961

Amount of Each Receipt this Period

1000.00

Voter File Purchase

Full Name (Last, First, Middle Initial)

B. Davitt for House

Mailing Address 611 W. Ashland

City State Zip Code  
 Indianola IA 50125

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 3 0 / 2 0 0 4

Transaction ID: C3950

Amount of Each Receipt this Period

500.00

Voter File Purchase

Full Name (Last, First, Middle Initial)

C. Committee to Re-Elect Don Shultz

Mailing Address 295 Kenilworth Road

City State Zip Code  
 Waterloo IA 50701

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 9 / 2 0 0 4

Transaction ID: C3770

Amount of Each Receipt this Period

500.00

Voter File Purchase

SUBTOTAL of Receipts This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

39687.72

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 239

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

## **A.** Internal Revenue Service

Mailing Address SERVICE Center

City Ogden State UT Zip Code 84201-0039

Purpose of Disbursement

Payroll taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D2513

Date of Disbursement

08 / 02 / 2004

Amount of Each Disbursement this Period

412.50

Full Name (Last, First, Middle Initial)

## **B.** Internal Revenue Service

Mailing Address SERVICE Center

City Ogden State UT Zip Code 84201-0039

Purpose of Disbursement

Payroll taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D2813

Date of Disbursement

08 / 13 / 2004

Amount of Each Disbursement this Period

8807.60

Full Name (Last, First, Middle Initial)

## **C.** Internal Revenue Service

Mailing Address SERVICE Center

City Ogden State UT Zip Code 84201-0039

Purpose of Disbursement

Payroll taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D2514

Date of Disbursement

08 / 18 / 2004

Amount of Each Disbursement this Period

412.51

**SUBTOTAL** of Disbursements This Page (optional) .....

9632.61

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 239

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

## **A. Internal Revenue Service**

Mailing Address SERVICE Center

City Ogden State UT Zip Code 84201-0039

Purpose of Disbursement

Payroll taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D2812

Date of Disbursement

08 / 27 / 2004

Amount of Each Disbursement this Period

8340.54

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address Suite 1

City Chicago State IL Zip Code 60679-0001

Purpose of Disbursement

Merchant Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D2259

Date of Disbursement

08 / 02 / 2004

Amount of Each Disbursement this Period

2.85

Full Name (Last, First, Middle Initial)

## **C. Treasurer, State of Iowa**

Mailing Address PO Box 10412

City Des Moines State IA Zip Code 50306-0412

Purpose of Disbursement

Permit renewal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D2373

Date of Disbursement

08 / 24 / 2004

Amount of Each Disbursement this Period

150.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8493.39

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 239

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

## **A. Discover Network**

Mailing Address PO Box 52145

City Phoenix State AZ Zip Code 85072-2145

Purpose of Disbursement  
Credit Card Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D2270

Date of Disbursement

08 / 03 / 2004

Amount of Each Disbursement this Period

15.30

Full Name (Last, First, Middle Initial)

## **B. JetEquity Travel LLC**

Mailing Address 176A Airport Rd - Hangar D1

City White Plains State NY Zip Code 10604

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D2810

Date of Disbursement

08 / 30 / 2004

Amount of Each Disbursement this Period

4497.88

Full Name (Last, First, Middle Initial)

## **C. Carter Printing**

Mailing Address 1739 E Grand Ave

City Des Moines State IA Zip Code 50316-3611

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D2809

Date of Disbursement

08 / 05 / 2004

Amount of Each Disbursement this Period

4014.10

**SUBTOTAL** of Disbursements This Page (optional) .....

8527.28

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 239

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

## **A. The Des Moines Embassy Club**

Mailing Address 801 Grand Ave  
Ste 4000

City Des Moines State IA Zip Code 50309-8000

Purpose of Disbursement  
Century Club Breakfast

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2803**

Date of Disbursement

08 / 05 / 2004

Amount of Each Disbursement this Period

3000.00

Not on behalf of any federal candidate

Full Name (Last, First, Middle Initial)

## **B. Direct Marketing Associates**

Mailing Address 2130 Delaware Ave

City Des Moines State IA Zip Code 50317-3523

Purpose of Disbursement  
Direct Mail-Hall of Fame

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2661**

Date of Disbursement

08 / 05 / 2004

Amount of Each Disbursement this Period

710.04

Not on behalf of any federal candidate

Full Name (Last, First, Middle Initial)

## **C. IA Board of Medical**

Mailing Address 400 SW 8th Street - Suite C

City Des Moines State IA Zip Code 50309

Purpose of Disbursement  
Mailing List Purchase

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2304**

Date of Disbursement

08 / 09 / 2004

Amount of Each Disbursement this Period

50.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3760.04

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Polk County Auditor Mailing Address 120 2nd Ave City Des Moines State IA Zip Code 50309-4757 Purpose of Disbursement Voting Machines Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> D2671 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>750.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	5		2	0	0	4	750.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	5		2	0	0	4														
750.00																							
<b>B.</b> Full Name (Last, First, Middle Initial) Cygnus Expositions Mailing Address PO Box 684080 City Milwaukee State WI Zip Code 53268-4080 Purpose of Disbursement Exhibition Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> D2564 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>475.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4	475.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	4		2	0	0	4														
475.00																							
<b>C.</b> Full Name (Last, First, Middle Initial) West Bank Mailing Address PO Box 65020 City West Des Moines State IA Zip Code 50265-0020 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> D26271 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>20989.65</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	2		2	0	0	4	20989.65
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	2		2	0	0	4														
20989.65																							

**SUBTOTAL** of Disbursements This Page (optional) .....

**22214.65**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

## **A. West Bank**

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement

Bank Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2360**

Date of Disbursement

08 / 13 / 2004

Amount of Each Disbursement this Period

125.00

Full Name (Last, First, Middle Initial)

## **B. West Bank**

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement

Bank Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2421**

Date of Disbursement

08 / 30 / 2004

Amount of Each Disbursement this Period

231.50

Full Name (Last, First, Middle Initial)

## **C. West Bank**

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement

Bank Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2384**

Date of Disbursement

08 / 31 / 2004

Amount of Each Disbursement this Period

181.07

**SUBTOTAL** of Disbursements This Page (optional) .....

537.57

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

## **A. West Bank**

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement  
bank charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2828

Date of Disbursement

08 / 31 / 2004

Amount of Each Disbursement this Period

16.95

Full Name (Last, First, Middle Initial)

## **B. West Bank**

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement  
Bank Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2274

Date of Disbursement

08 / 31 / 2004

Amount of Each Disbursement this Period

16.66

Full Name (Last, First, Middle Initial)

## **C. West Bank**

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement  
Bank Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2266

Date of Disbursement

08 / 31 / 2004

Amount of Each Disbursement this Period

11.93

**SUBTOTAL** of Disbursements This Page (optional) .....

45.54

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

## **A. West Bank**

Mailing Address PO Box 65020

City State Zip Code  
West Des Moines IA 50265-0020

Purpose of Disbursement

Bank Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2280**

Date of Disbursement

08 / 31 / 2004

Amount of Each Disbursement this Period

25.46

Full Name (Last, First, Middle Initial)

## **B. Garner Printing**

Mailing Address 1697 NE 53rd Ave

City State Zip Code  
Des Moines IA 50313-2128

Purpose of Disbursement

Convention ballots

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2792**

Date of Disbursement

08 / 30 / 2004

Amount of Each Disbursement this Period

1527.46

Full Name (Last, First, Middle Initial)

## **C. Iowa State Fair**

Mailing Address PO Box 57130

City State Zip Code  
Des Moines IA 50317-0003

Purpose of Disbursement

Fair tickets

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2341**

Date of Disbursement

08 / 03 / 2004

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1652.92

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 239

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
Iowa State Fair

Mailing Address PO Box 57130

City State Zip Code  
Des Moines IA 50317-0003

Purpose of Disbursement  
Fair parking

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D2670

Date of Disbursement

/   /

Amount of Each Disbursement this Period

750.00

**SUBTOTAL** of Disbursements This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

55614.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 51 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Robert D Hariman		<b>Transaction ID:</b> D2295 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address		<b>Amount of Each Disbursement this Period</b> <div>40.00</div>	
City Des Moines	State IA		Zip Code 50312-4423
Purpose of Disbursement Refund of Contribution			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

  

<b>B.</b> Full Name (Last, First, Middle Initial) John Twomey		<b>Transaction ID:</b> D2326 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address      1445 Banyan Cir		<b>Amount of Each Disbursement this Period</b> <div>80.00</div>	
City Pompano Beach	State FL		Zip Code 33069-4975
Purpose of Disbursement Refund of Contribution			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

120.00

**TOTAL** This Period (last page this line number only) ..... ►

120.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City  
Des Moines

State  
IA

Zip Code  
50321-2841

Purpose of Disbursement  
Transfer to Non-Federal for cash flow

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D16732

Date of Disbursement

/   /

Amount of Each Disbursement this Period

640.00

**SUBTOTAL** of Disbursements This Page (optional) .....

640.00

**TOTAL** This Period (last page this line number only) .....

640.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 53 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Janelle M Domeyer		<b>Transaction ID:</b> D2723 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 1916 Parkwild Dr Apt 50		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>891.50</td> </tr> </table>	891.50																			
891.50																						
City Council Bluffs	State IA		Zip Code 51503-1875																			
Purpose of Disbursement Net Payroll			<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																		
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																						
<b>B.</b> Full Name (Last, First, Middle Initial) Janelle M Domeyer		<b>Transaction ID:</b> D2260 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 1916 Parkwild Dr Apt 50		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>7.89</td> </tr> </table>	7.89																			
7.89																						
City Council Bluffs	State IA		Zip Code 51503-1875																			
Purpose of Disbursement Reimbursement/Travel			<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																		
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																						
<b>C.</b> Full Name (Last, First, Middle Initial) Janelle M Domeyer		<b>Transaction ID:</b> D2727 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 1916 Parkwild Dr Apt 50		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>901.50</td> </tr> </table>	901.50																			
901.50																						
City Council Bluffs	State IA		Zip Code 51503-1875																			
Purpose of Disbursement Net Payroll			<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																		
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																						
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>1800.89</td> </tr> </table>	1800.89																			
1800.89																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)  
Anthony J Boyd

Mailing Address 4168 E Ovid Ave

City State Zip Code  
Des Moines IA 50317-5528

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2398

Date of Disbursement

/   /

Amount of Each Disbursement this Period

215.87

B. Full Name (Last, First, Middle Initial)  
Michael M Dykes

Mailing Address 5410 Shriver Ave

City State Zip Code  
Des Moines IA 50312-2046

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2631

Date of Disbursement

/   /

Amount of Each Disbursement this Period

583.48

C. Full Name (Last, First, Middle Initial)  
Internal Revenue Service

Mailing Address SERVICE Center

City State Zip Code  
Ogden UT 84201-0039

Purpose of Disbursement  
Payroll taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2814

Date of Disbursement

/   /

Amount of Each Disbursement this Period

14066.92

**SUBTOTAL** of Disbursements This Page (optional) .....

14866.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

## **A. Internal Revenue Service**

Mailing Address SERVICE Center

City Ogden State UT Zip Code 84201-0039

Purpose of Disbursement

Payroll taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2815

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
08 18 2004

Amount of Each Disbursement this Period

15240.48

Full Name (Last, First, Middle Initial)

## **B. Corey L Davis**

Mailing Address 1220 1st Ave NE

City Cedar Rapids State IA Zip Code 52402-5008

Purpose of Disbursement

Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2429

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
08 10 2004

Amount of Each Disbursement this Period

243.82

Full Name (Last, First, Middle Initial)

## **C. Corey L Davis**

Mailing Address 1220 1st Ave NE

City Cedar Rapids State IA Zip Code 52402-5008

Purpose of Disbursement

Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2389

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
08 24 2004

Amount of Each Disbursement this Period

185.55

**SUBTOTAL** of Disbursements This Page (optional) .....

15669.85

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 56 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Melissa L Zamora		<b>Transaction ID:</b> D2675 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 210 S Prairer View Dr No 1215		<b>Amount of Each Disbursement this Period</b> <div>762.21</div>
City West Des Moines State IA Zip Code 50266		
Purpose of Disbursement Net Payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Melissa L Zamora		<b>Transaction ID:</b> D2721 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 210 S Prairer View Dr No 1215		<b>Amount of Each Disbursement this Period</b> <div>883.50</div>
City West Des Moines State IA Zip Code 50266		
Purpose of Disbursement Net Payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Seth A Brooks		<b>Transaction ID:</b> D2696 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 3828 Cass St Apt 5		<b>Amount of Each Disbursement this Period</b> <div>819.50</div>
City Omaha State NE Zip Code 68131-1851		
Purpose of Disbursement Net Payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>2465.21</div>
<b>TOTAL</b> This Period (last page this line number only) .....		



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Seth A Brooks		<b>Transaction ID:</b> D2697 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 3828 Cass St Apt 5		Amount of Each Disbursement this Period <table border="1"> <tr> <td>819.50</td> </tr> </table>	819.50																			
819.50																						
City Omaha State NE Zip Code 68131-1851																						
Purpose of Disbursement Net Payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Christopher D Bonfig		<b>Transaction ID:</b> D2705 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 320 E Burlington St Apt 8		Amount of Each Disbursement this Period <table border="1"> <tr> <td>858.50</td> </tr> </table>	858.50																			
858.50																						
City Iowa City State IA Zip Code 52240-1670																						
Purpose of Disbursement Net Payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Christopher D Bonfig		<b>Transaction ID:</b> D2706 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 320 E Burlington St Apt 8		Amount of Each Disbursement this Period <table border="1"> <tr> <td>858.50</td> </tr> </table>	858.50																			
858.50																						
City Iowa City State IA Zip Code 52240-1670																						
Purpose of Disbursement Net Payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>2536.50</td> </tr> </table>	2536.50																			
2536.50																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Ramsey J Green		<b>Transaction ID:</b> D2591 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>	
Mailing Address 500 W Broadway Ste 100		<b>Amount of Each Disbursement this Period</b> <div>504.23</div>	
City Council Bluffs	State IA		Zip Code 51503-0819
Purpose of Disbursement Net Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Ramsey J Green		<b>Transaction ID:</b> D2734 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>	
Mailing Address 500 W Broadway Ste 100		<b>Amount of Each Disbursement this Period</b> <div>924.50</div>	
City Council Bluffs	State IA		Zip Code 51503-0819
Purpose of Disbursement Net Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) James A Johnson		<b>Transaction ID:</b> D2659 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>	
Mailing Address 2516 Piedmont Ave Apt 25		<b>Amount of Each Disbursement this Period</b> <div>691.72</div>	
City Berkeley	State CA		Zip Code 94704-3144
Purpose of Disbursement Net Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>2120.45</div>	
<b>TOTAL</b> This Period (last page this line number only) .....			

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Treasurer, State of Iowa

Mailing Address PO Box 10412

City Des Moines State IA Zip Code 50306-0412

Purpose of Disbursement  
Iowa W/H Deposit

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2320**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

72.00

Full Name (Last, First, Middle Initial)

**B.** Treasurer, State of Iowa

Mailing Address PO Box 10412

City Des Moines State IA Zip Code 50306-0412

Purpose of Disbursement  
Iowa W/H Deposit

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2807**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3620.00

Full Name (Last, First, Middle Initial)

**C.** Maria M Misra

Mailing Address 517 Iowa Ave  
Apt 4A

City Iowa City State IA Zip Code 52240-1814

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2477**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

358.34

**SUBTOTAL** of Disbursements This Page (optional) .....

4050.34

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Maria M Misra</b> Full Name (Last, First, Middle Initial) Mailing Address 517 Iowa Ave Apt 4A City Iowa City State IA Zip Code 52240-1814 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2520</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 4 Amount of Each Disbursement this Period 422.46
<b>B. Andrew J Wenthe</b> Full Name (Last, First, Middle Initial) Mailing Address 4410 University Ave Apt 217 City Cedar Falls State IA Zip Code 50613-6220 Purpose of Disbursement Net Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2685</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 4 Amount of Each Disbursement this Period 798.50
<b>C. Andrew J Wenthe</b> Full Name (Last, First, Middle Initial) Mailing Address 4410 University Ave Apt 217 City Cedar Falls State IA Zip Code 50613-6220 Purpose of Disbursement Reimbursement/Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2338</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 4 Amount of Each Disbursement this Period 97.52

**SUBTOTAL** of Disbursements This Page (optional) .....

**1318.48**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Andrew J Wenthe

Mailing Address 4410 University Ave  
Apt 217

City Cedar Falls State IA Zip Code 50613-6220

Purpose of Disbursement  
Reimbursement/Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2461

Date of Disbursement

08 / 31 / 2004

Amount of Each Disbursement this Period

300.69

Full Name (Last, First, Middle Initial)

**B.** Andrew J Wenthe

Mailing Address 4410 University Ave  
Apt 217

City Cedar Falls State IA Zip Code 50613-6220

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2688

Date of Disbursement

08 / 31 / 2004

Amount of Each Disbursement this Period

798.50

Full Name (Last, First, Middle Initial)

**C.** Sarah J Donahue

Mailing Address 100 N 4th St

City Burlington State IA Zip Code 52601-5502

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2775

Date of Disbursement

08 / 13 / 2004

Amount of Each Disbursement this Period

1230.25

**SUBTOTAL** of Disbursements This Page (optional) .....

2329.44

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Sarah J Donahue		<b>Transaction ID:</b> D2777 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>3</td><td>1</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 100 N 4th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1230.25</td> </tr> </table>	1230.25																			
1230.25																						
City Burlington	State IA		Zip Code 52601-5502																			
Purpose of Disbursement Net Payroll			<input type="checkbox"/> Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Brent L Nerhus		<b>Transaction ID:</b> D2367 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>1</td><td>0</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 1901 Delmar Street		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>140.76</td> </tr> </table>	140.76																			
140.76																						
City Burlington	State IA		Zip Code 52601																			
Purpose of Disbursement Net payroll			<input type="checkbox"/> Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Brent L Nerhus		<b>Transaction ID:</b> D2595 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>2</td><td>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 1901 Delmar Street		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>515.45</td> </tr> </table>	515.45																			
515.45																						
City Burlington	State IA		Zip Code 52601																			
Purpose of Disbursement Net payroll			<input type="checkbox"/> Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

1886.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 239

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Megan M Weddingfeld

Mailing Address 5643 Kirkwood Blvd SW

City Cedar Rapids State IA Zip Code 52404-8233

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2588**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.89

Full Name (Last, First, Middle Initial)

**B.** Megan M Weddingfeld

Mailing Address 5643 Kirkwood Blvd SW

City Cedar Rapids State IA Zip Code 52404-8233

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2543**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

452.03

Full Name (Last, First, Middle Initial)

**C.** Brendon D Moe

Mailing Address 3202 University Dr  
Apt K2

City Cedar Falls State IA Zip Code 50613-4871

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2496**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

392.64

**SUBTOTAL** of Disbursements This Page (optional) .....

1345.56

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 64 / 239

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Brendon D Moe

Mailing Address 3202 University Dr  
Apt K2

City Cedar Falls State IA Zip Code 50613-4871

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2502**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

399.85

Full Name (Last, First, Middle Initial)

**B.** Jamie McQuillen-Benge

Mailing Address 2515 Tremont St

City Cedar Falls State IA Zip Code 50613-3950

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2498**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

394.51

Full Name (Last, First, Middle Initial)

**C.** Jamie McQuillen-Benge

Mailing Address 2515 Tremont St

City Cedar Falls State IA Zip Code 50613-3950

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2582**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

498.42

**SUBTOTAL** of Disbursements This Page (optional) .....

1292.78

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Crystal Roldan		<b>Transaction ID:</b> D2523 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 766 Charlotte Ave		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>424.81</td> </tr> </table>	424.81																			
424.81																						
City Davenport State IA Zip Code 52803-5725																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>B.</b> Full Name (Last, First, Middle Initial) Crystal Roldan		<b>Transaction ID:</b> D2565 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 766 Charlotte Ave		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>475.60</td> </tr> </table>	475.60																			
475.60																						
City Davenport State IA Zip Code 52803-5725																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>C.</b> Full Name (Last, First, Middle Initial) Ramona J Muse		<b>Transaction ID:</b> D2478 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 1704 Q Ave		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>358.40</td> </tr> </table>	358.40																			
358.40																						
City Madrid State IA Zip Code 50156-7575																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>1258.81</td> </tr> </table>	1258.81																			
1258.81																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Ramona J Muse		<b>Transaction ID:</b> D2524 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>2</td><td>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 1704 Q Ave		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>425.43</td> </tr> </table>	425.43																			
425.43																						
City Madrid State IA Zip Code 50156-7575																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Nicolas J Ferre		<b>Transaction ID:</b> D2751 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>1</td><td>3</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 824 Whitman Ct		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>533.55</td> </tr> </table>	533.55																			
533.55																						
City Libertyville State IL Zip Code 60048-1667																						
Purpose of Disbursement Net Payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Nicolas J Ferre		<b>Transaction ID:</b> D2738 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>3</td><td>1</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 824 Whitman Ct		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>940.61</td> </tr> </table>	940.61																			
940.61																						
City Libertyville State IL Zip Code 60048-1667																						
Purpose of Disbursement Net Payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>1899.59</td> </tr> </table>	1899.59																			
1899.59																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Carrie R Giddins		<b>Transaction ID:</b> D2761 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 4225 Fleur Drive #238		<b>Amount of Each Disbursement this Period</b> <div>1130.25</div>
City Des Moines State IA Zip Code 50321		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Carrie R Giddins		<b>Transaction ID:</b> D2778 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 4225 Fleur Drive #238		<b>Amount of Each Disbursement this Period</b> <div>1230.25</div>
City Des Moines State IA Zip Code 50321		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Shawn M Rolland		<b>Transaction ID:</b> D2673 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 1243 34th St		<b>Amount of Each Disbursement this Period</b> <div>750.76</div>
City Des Moines State IA Zip Code 50311-2701		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**3111.26**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 239

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Shawn M Rolland		<b>Transaction ID:</b> D2674 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>	
Mailing Address 1243 34th St		<b>Amount of Each Disbursement this Period</b> <div>750.76</div>	
City Des Moines State IA Zip Code 50311-2701	Purpose of Disbursement Net Payroll	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Emily M Van Norman		<b>Transaction ID:</b> D2653 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 2515 Tremont St		<b>Amount of Each Disbursement this Period</b> <div>655.76</div>	
City Cedar Falls State IA Zip Code 50613-3950	Purpose of Disbursement Net Payroll	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Emily M Van Norman		<b>Transaction ID:</b> D2550 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 2515 Tremont St		<b>Amount of Each Disbursement this Period</b> <div>461.08</div>	
City Cedar Falls State IA Zip Code 50613-3950	Purpose of Disbursement Net Payroll	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**1867.60**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) James Boyd		<b>Transaction ID:</b> D2415 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 1902 Kingman Blvd		<b>Amount of Each Disbursement this Period</b> <div>228.00</div>	
City Des Moines	State IA		Zip Code 50311
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Jason D Van Zee		<b>Transaction ID:</b> D2599 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 2555 Oxford Ln NW Apt 4		<b>Amount of Each Disbursement this Period</b> <div>523.34</div>	
City Cedar Rapids	State IA		Zip Code 52405-1183
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Jason D Van Zee		<b>Transaction ID:</b> D2369 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 2555 Oxford Ln NW Apt 4		<b>Amount of Each Disbursement this Period</b> <div>146.03</div>	
City Cedar Rapids	State IA		Zip Code 52405-1183
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**897.37**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Edward J Goodman		<b>Transaction ID:</b> D2592 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 1306 Tomahawk Dr		<b>Amount of Each Disbursement this Period</b> <div>507.78</div>	
City Dubuque	State IA		Zip Code 52003-7878
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Edward J Goodman		<b>Transaction ID:</b> D2526 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 1306 Tomahawk Dr		<b>Amount of Each Disbursement this Period</b> <div>429.36</div>	
City Dubuque	State IA		Zip Code 52003-7878
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) John P Noonan		<b>Transaction ID:</b> D2576 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 1707 Navajo St		<b>Amount of Each Disbursement this Period</b> <div>489.46</div>	
City Burlington	State IA		Zip Code 52601-3489
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL of Disbursements This Page (optional)</b> .....		<div>1426.60</div>	
<b>TOTAL This Period (last page this line number only)</b> .....			

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) John P Noonan		<b>Transaction ID:</b> D2654 <b>Date of Disbursement</b> <div> <div>08</div> <div>24</div> <div>2004</div> </div>	
Mailing Address 1707 Navajo St			
City Burlington	State IA	Zip Code 52601-3489	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
<b>B.</b> Full Name (Last, First, Middle Initial) VAN LCC		<b>Transaction ID:</b> D2823 <b>Date of Disbursement</b> <div> <div>08</div> <div>05</div> <div>2004</div> </div>	
Mailing Address 54 Regent St			
City Cambridge	State MA	Zip Code 02140-2112	
Purpose of Disbursement Voter File Hosting		<div> <div>Category/Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
<b>C.</b> Full Name (Last, First, Middle Initial) Thomas F Stewart		<b>Transaction ID:</b> D2494 <b>Date of Disbursement</b> <div> <div>08</div> <div>10</div> <div>2004</div> </div>	
Mailing Address 300 W Penn St			
City Williamsburg	State IA	Zip Code 52361-9460	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

**SUBTOTAL** of Disbursements This Page (optional) .....

**5294.81**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Thomas F Stewart

Mailing Address 300 W Penn St

City Williamsburg State IA Zip Code 52361-9460

Purpose of Disbursement

Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2508**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 8 / 2 4 / 2 0 0 4

Amount of Each Disbursement this Period

407.22

Full Name (Last, First, Middle Initial)

**B.** Richard E Harman

Mailing Address 258 N Hyland Ave  
Apt 1

City Ames State IA Zip Code 50014-2863

Purpose of Disbursement

Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2636**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 8 / 1 0 / 2 0 0 4

Amount of Each Disbursement this Period

597.28

Full Name (Last, First, Middle Initial)

**C.** Richard E Harman

Mailing Address 258 N Hyland Ave  
Apt 1

City Ames State IA Zip Code 50014-2863

Purpose of Disbursement

Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2606**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 8 / 2 4 / 2 0 0 4

Amount of Each Disbursement this Period

534.24

**SUBTOTAL** of Disbursements This Page (optional) .....

1538.74

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Nathan J Peterson		<b>Transaction ID:</b> D2555 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 1009 Leavenworth St Apt 310		<b>Amount of Each Disbursement this Period</b> <div>461.75</div>	
City Omaha	State NE		Zip Code 68102-2923
Purpose of Disbursement Net Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Image Point		<b>Transaction ID:</b> D2804 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 5 / 2 0 0 4</div> </div>	
Mailing Address 1224 Laporte Rd		<b>Amount of Each Disbursement this Period</b> <div>3122.71</div>	
City Waterloo	State IA		Zip Code 50702-2708
Purpose of Disbursement T-shirts for resale			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Kyle L Meck		<b>Transaction ID:</b> D2584 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 15206 145th Ave		<b>Amount of Each Disbursement this Period</b> <div>498.69</div>	
City Burlington	State IA		Zip Code 52601-8749
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>4083.15</div>	
<b>TOTAL</b> This Period (last page this line number only) .....			

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Kyle L Meck		<b>Transaction ID:</b> D2447 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 15206 145th Ave		<b>Amount of Each Disbursement this Period</b> <div>286.28</div>
City Burlington State IA Zip Code 52601-8749		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Alexandra E Cooper		<b>Transaction ID:</b> D2573 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 217 Coe College		<b>Amount of Each Disbursement this Period</b> <div>487.57</div>
City Cedar Rapids State IA Zip Code 52402		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Alexandra E Cooper		<b>Transaction ID:</b> D2479 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 217 Coe College		<b>Amount of Each Disbursement this Period</b> <div>370.04</div>
City Cedar Rapids State IA Zip Code 52402		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**1143.89**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Matthew D Deferranti		<b>Transaction ID:</b> D2782 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 1406 46th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1353.12</td> </tr> </table>	1353.12																			
1353.12																						
City Des Moines State IA Zip Code 50311-2429																						
Purpose of Disbursement Net Payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Matthew D Deferranti		<b>Transaction ID:</b> D2783 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 1406 46th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1353.13</td> </tr> </table>	1353.13																			
1353.13																						
City Des Moines State IA Zip Code 50311-2429																						
Purpose of Disbursement Net Payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Corey J Goerd		<b>Transaction ID:</b> D2527 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 4701 86th PI		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>429.43</td> </tr> </table>	429.43																			
429.43																						
City Urbandale State IA Zip Code 50322																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

3135.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Corey J Goerd</b>		<b>Transaction ID: D2553</b> <b>Date of Disbursement</b> <div> <div>08</div> <div>24</div> <div>2004</div> </div>	
Mailing Address 4701 86th PI			
City <b>Urbandale</b>	State <b>IA</b>	Zip Code <b>50322</b>	Amount of Each Disbursement this Period <div>461.75</div>
Purpose of Disbursement Net payroll		<div>Category/Type</div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Jennifer C Stokes</b>		<b>Transaction ID: D2324</b> <b>Date of Disbursement</b> <div> <div>08</div> <div>13</div> <div>2004</div> </div>	
Mailing Address 517 S Governor St			
City <b>Iowa City</b>	State <b>IA</b>	Zip Code <b>52240-5624</b>	Amount of Each Disbursement this Period <div>75.87</div>
Purpose of Disbursement Reimbursement/Travel		<div>Category/Type</div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Jennifer C Stokes</b>		<b>Transaction ID: D2684</b> <b>Date of Disbursement</b> <div> <div>08</div> <div>13</div> <div>2004</div> </div>	
Mailing Address 517 S Governor St			
City <b>Iowa City</b>	State <b>IA</b>	Zip Code <b>52240-5624</b>	Amount of Each Disbursement this Period <div>798.50</div>
Purpose of Disbursement Net Payroll		<div>Category/Type</div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1336.12</div>	
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Jennifer C Stokes		<b>Transaction ID:</b> D2462 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 517 S Governor St		<b>Amount of Each Disbursement this Period</b> <div>303.78</div>
City Iowa City State IA Zip Code 52240-5624		
Purpose of Disbursement Reimbursement/Travel	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Jennifer C Stokes		<b>Transaction ID:</b> D2687 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 517 S Governor St		<b>Amount of Each Disbursement this Period</b> <div>798.50</div>
City Iowa City State IA Zip Code 52240-5624		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Jeffrey D Jacobs		<b>Transaction ID:</b> D2519 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 3415 119th Avenue Ct W		<b>Amount of Each Disbursement this Period</b> <div>421.79</div>
City Milan State IL Zip Code 61264-4500		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1524.07</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)  
Jeffrey D Jacobs

Mailing Address 3415 119th Avenue Ct W

City Milan State IL Zip Code 61264-4500

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2641

Date of Disbursement

/   /

Amount of Each Disbursement this Period

611.49

B. Full Name (Last, First, Middle Initial)  
Jeffrey D Jacobs

Mailing Address 3415 119th Avenue Ct W

City Milan State IL Zip Code 61264-4500

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2331

Date of Disbursement

/   /

Amount of Each Disbursement this Period

87.75

C. Full Name (Last, First, Middle Initial)  
Jeffrey D Jacobs

Mailing Address 3415 119th Avenue Ct W

City Milan State IL Zip Code 61264-4500

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2760

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1129.07

**SUBTOTAL** of Disbursements This Page (optional) .....

1828.31

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) William J Sims		<b>Transaction ID:</b> D2310 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 1317 E 17th St		<b>Amount of Each Disbursement this Period</b> <div>55.41</div>
City Des Moines State IA Zip Code 50316-4019		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) William J Sims		<b>Transaction ID:</b> D2501 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 1317 E 17th St		<b>Amount of Each Disbursement this Period</b> <div>398.57</div>
City Des Moines State IA Zip Code 50316-4019		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Kurt W Garretson		<b>Transaction ID:</b> D2583 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 1878 Salem Rd		<b>Amount of Each Disbursement this Period</b> <div>498.69</div>
City Salem State IA Zip Code 52649-9452		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

952.67

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Kurt W Garretson		<b>Transaction ID:</b> D2629 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 1878 Salem Rd		<b>Amount of Each Disbursement this Period</b> <div>577.19</div>
City Salem State IA Zip Code 52649-9452		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Michael J Wiegand		<b>Transaction ID:</b> D2623 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 1242 42nd St		<b>Amount of Each Disbursement this Period</b> <div>564.43</div>
City Des Moines State IA Zip Code 50311-2527		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Michael J Wiegand		<b>Transaction ID:</b> D2474 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 1242 42nd St		<b>Amount of Each Disbursement this Period</b> <div>346.31</div>
City Des Moines State IA Zip Code 50311-2527		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**1487.93**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Chad M Zenisek

Mailing Address 7400 Saint Patricks Rd

City State Zip Code  
Fairfax IA 52228-9793

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2605**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

533.68

Full Name (Last, First, Middle Initial)

**B.** Tavis M Hall

Mailing Address 2085 Howard Avenue

City State Zip Code  
Waterloo IA 50702-3134

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2457**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

294.84

Full Name (Last, First, Middle Initial)

**C.** Tavis M Hall

Mailing Address 2085 Howard Avenue

City State Zip Code  
Waterloo IA 50702-3134

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2648**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

649.72

**SUBTOTAL** of Disbursements This Page (optional) .....

1478.24

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Oliver Roeder		<b>Transaction ID:</b> D2552 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 110 Lincoln Place Dr		<b>Amount of Each Disbursement this Period</b> <div>461.75</div>
City Des Moines State IA Zip Code 50312-4504		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Oliver Roeder		<b>Transaction ID:</b> D2578 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 110 Lincoln Place Dr		<b>Amount of Each Disbursement this Period</b> <div>494.07</div>
City Des Moines State IA Zip Code 50312-4504		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Edward A Furchtenicht		<b>Transaction ID:</b> D2530 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 621 19th St		<b>Amount of Each Disbursement this Period</b> <div>433.22</div>
City Des Moines State IA Zip Code 50309-3301		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**1389.04**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Edward A Furchtenicht		<b>Transaction ID:</b> D2465 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 621 19th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>314.08</td> </tr> </table>	314.08																			
314.08																						
City Des Moines State IA Zip Code 50309-3301																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Philip F Rippke		<b>Transaction ID:</b> D2646 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 2109 College St Apt 49		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>641.79</td> </tr> </table>	641.79																			
641.79																						
City Cedar Falls State IA Zip Code 50613-3681																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Philip F Rippke		<b>Transaction ID:</b> D2660 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 2109 College St Apt 49		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>693.16</td> </tr> </table>	693.16																			
693.16																						
City Cedar Falls State IA Zip Code 50613-3681																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>1649.03</td> </tr> </table>	1649.03																			
1649.03																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Kathleen T Ryan		<b>Transaction ID:</b> D2365 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 4449 Woolworth Ave		<b>Amount of Each Disbursement this Period</b> <div>138.52</div>
City Omaha State NE Zip Code 68105-1756		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Sandra E Reich		<b>Transaction ID:</b> D2556 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 1519 29th St		<b>Amount of Each Disbursement this Period</b> <div>464.74</div>
City Moline State IL Zip Code 61265-3317		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Sandra E Reich		<b>Transaction ID:</b> D2572 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 1519 29th St		<b>Amount of Each Disbursement this Period</b> <div>484.83</div>
City Moline State IL Zip Code 61265-3317		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL of Disbursements This Page (optional)</b> .....		<div>1088.09</div>
<b>TOTAL This Period (last page this line number only)</b> .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Javarra M Hodge		<b>Transaction ID:</b> D2446 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 227 Madison St		<b>Amount of Each Disbursement this Period</b> <div>286.28</div>	
City Waterloo	State IA		Zip Code 50703-4239
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Javarra M Hodge		<b>Transaction ID:</b> D2610 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 227 Madison St		<b>Amount of Each Disbursement this Period</b> <div>540.25</div>	
City Waterloo	State IA		Zip Code 50703-4239
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Luke R Gran		<b>Transaction ID:</b> D2423 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 1137 Friley Stange		<b>Amount of Each Disbursement this Period</b> <div>235.12</div>	
City Ames	State IA		Zip Code 50011-0001
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1061.65</div>	
<b>TOTAL</b> This Period (last page this line number only) .....			

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Luke R Gran		<b>Transaction ID:</b> D2495 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 1137 Friley Stange		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>391.58</div> </div>
City Ames State IA Zip Code 50011-0001		
Purpose of Disbursement Net payroll	<div> <div></div> <div>Category/ Type</div> </div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Ashley R Kockler		<b>Transaction ID:</b> D2468 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 705 14th Street Pl		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>333.62</div> </div>
City Nevada State IA Zip Code 50201-2405		
Purpose of Disbursement Net payroll	<div> <div></div> <div>Category/ Type</div> </div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Zachary B Williams		<b>Transaction ID:</b> D2390 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 3042 Livonia Ave Apt B2		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>188.28</div> </div>
City Los Angeles State CA Zip Code 90034-3167		
Purpose of Disbursement Net Payroll	<div> <div></div> <div>Category/ Type</div> </div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**913.48**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Zachary B Williams		<b>Transaction ID:</b> D2737 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>	
Mailing Address 3042 Livonia Ave Apt B2		Amount of Each Disbursement this Period <div>932.06</div>	
City Los Angeles	State CA		Zip Code 90034-3167
Purpose of Disbursement Reimbursement/Travel			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Alexander V Fisher		<b>Transaction ID:</b> D2621 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 164 Hummingbird Ln		Amount of Each Disbursement this Period <div>558.00</div>	
City Iowa City	State IA		Zip Code 52245-9257
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Alexander V Fisher		<b>Transaction ID:</b> D2558 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 164 Hummingbird Ln		Amount of Each Disbursement this Period <div>470.71</div>	
City Iowa City	State IA		Zip Code 52245-9257
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1960.77</div>	
<b>TOTAL</b> This Period (last page this line number only) .....			

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)  
Jacob W Trumm

Mailing Address 106 N Governor St

City Iowa City State IA Zip Code 52245-2614

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2569

Date of Disbursement

/   /

Amount of Each Disbursement this Period

482.86

B. Full Name (Last, First, Middle Initial)  
Jacob W Trumm

Mailing Address 106 N Governor St

City Iowa City State IA Zip Code 52245-2614

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2343

Date of Disbursement

/   /

Amount of Each Disbursement this Period

101.59

C. Full Name (Last, First, Middle Initial)  
Bridget Trainor

Mailing Address 24 Olive Ct

City Iowa City State IA Zip Code 52246

Purpose of Disbursement  
reimb travel exp at national conven

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2829

Date of Disbursement

/   /

Amount of Each Disbursement this Period

201.29

SUBTOTAL of Disbursements This Page (optional) .....

785.74

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Alison N Kurth		<b>Transaction ID:</b> D2716 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 1933 N Marquette Street		<b>Amount of Each Disbursement this Period</b> <div>883.50</div>
City Davenport State IA Zip Code 52804-2159		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Alison N Kurth		<b>Transaction ID:</b> D2262 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 1933 N Marquette Street		<b>Amount of Each Disbursement this Period</b> <div>9.72</div>
City Davenport State IA Zip Code 52804-2159		
Purpose of Disbursement Reimbursement/Travel	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Alison N Kurth		<b>Transaction ID:</b> D2744 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 1933 N Marquette Street		<b>Amount of Each Disbursement this Period</b> <div>995.29</div>
City Davenport State IA Zip Code 52804-2159		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1888.51</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Mark R Fetterhoff		<b>Transaction ID:</b> D2516 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 1310 30th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>415.75</td> </tr> </table>	415.75																			
415.75																						
City Des Moines State IA Zip Code 50311-2904	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Mark R Fetterhoff		<b>Transaction ID:</b> D2470 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 1310 30th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>338.40</td> </tr> </table>	338.40																			
338.40																						
City Des Moines State IA Zip Code 50311-2904	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Steven S Sloan		<b>Transaction ID:</b> D2276 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 205 14th St SE Apt 305		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>21.55</td> </tr> </table>	21.55																			
21.55																						
City Cedar Rapids State IA Zip Code 52403-4068	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Reimbursement/Travel																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

775.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Steven S Sloan		<b>Transaction ID:</b> D2733 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 205 14th St SE Apt 305		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>922.14</td> </tr> </table>	922.14																			
922.14																						
City Cedar Rapids State IA Zip Code 52403-4068																						
Purpose of Disbursement Net payroll	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>		Category/ Type																			
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>B.</b> Full Name (Last, First, Middle Initial) Steven S Sloan		<b>Transaction ID:</b> D2328 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 205 14th St SE Apt 305		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>84.88</td> </tr> </table>	84.88																			
84.88																						
City Cedar Rapids State IA Zip Code 52403-4068																						
Purpose of Disbursement Reimbursement/Travel	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>		Category/ Type																			
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>C.</b> Full Name (Last, First, Middle Initial) Steven S Sloan		<b>Transaction ID:</b> D2732 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 205 14th St SE Apt 305		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>922.13</td> </tr> </table>	922.13																			
922.13																						
City Cedar Rapids State IA Zip Code 52403-4068																						
Purpose of Disbursement Net payroll	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>		Category/ Type																			
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>SUBTOTAL of Disbursements This Page (optional) .....</b>		<table border="1"> <tr> <td>1929.15</td> </tr> </table>	1929.15																			
1929.15																						
<b>TOTAL This Period (last page this line number only) .....</b>		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 92 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Michael E Smith</b> Full Name (Last, First, Middle Initial) Mailing Address 980 Arica Ave City Marion State IA Zip Code 52302-5915 Purpose of Disbursement Net Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2540</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 4 Amount of Each Disbursement this Period 449.61
<b>B. Meghan E Brown</b> Full Name (Last, First, Middle Initial) Mailing Address 1041 S Lucas Apt 1 City Iowa City State IA Zip Code 52240 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2401</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 4 Amount of Each Disbursement this Period 217.02
<b>C. Erin A Driesbach</b> Full Name (Last, First, Middle Initial) Mailing Address 1820 S 41st St City Lincoln State NE Zip Code 68506-1103 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2598</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 4 Amount of Each Disbursement this Period 522.41

**SUBTOTAL** of Disbursements This Page (optional) .....

1189.04

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Erin A Driesbach		<b>Transaction ID:</b> D2505 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 1820 S 41st St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>401.75</td> </tr> </table>	401.75																			
401.75																						
City Lincoln State NE Zip Code 68506-1103																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>814.50</td> </tr> </table>	814.50																			
814.50																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Full Name (Last, First, Middle Initial) <b>B.</b> Nicholas R Leitheiser																						
Mailing Address 616 Billy Sunday Rd No 207																						
City Ames State IA Zip Code 50010		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>253.74</td> </tr> </table>	253.74																			
253.74																						
Purpose of Disbursement Net Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1469.99</td> </tr> </table>	1469.99																			
1469.99																						
Full Name (Last, First, Middle Initial) <b>C.</b> Nicholas R Leitheiser																						
Mailing Address 616 Billy Sunday Rd No 207																						
City Ames State IA Zip Code 50010																						
Purpose of Disbursement Reimbursement/Travel		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1469.99</td> </tr> </table>	1469.99																			
1469.99																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>1469.99</td> </tr> </table>	1469.99																			
1469.99																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Nicholas R Leitheiser		<b>Transaction ID:</b> D2380 <b>Date of Disbursement</b> <div> <div>08</div> <div>31</div> <div>2004</div> </div>
Mailing Address 616 Billy Sunday Rd No 207		Amount of Each Disbursement this Period <div>172.59</div>
City Ames State IA Zip Code 50010		
Purpose of Disbursement Reimbursement/Travel	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Nicholas R Leitheiser		<b>Transaction ID:</b> D2692 <b>Date of Disbursement</b> <div> <div>08</div> <div>31</div> <div>2004</div> </div>
Mailing Address 616 Billy Sunday Rd No 207		Amount of Each Disbursement this Period <div>814.50</div>
City Ames State IA Zip Code 50010		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Laura A Pomerance		<b>Transaction ID:</b> D2729 <b>Date of Disbursement</b> <div> <div>08</div> <div>31</div> <div>2004</div> </div>
Mailing Address 6904 Maple Ave		Amount of Each Disbursement this Period <div>901.50</div>
City Chevy Chase State MD Zip Code 20815-5114		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1888.59

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Omaha World-Herald

Mailing Address PO Box 2964

City Omaha State NE Zip Code 68103-2964

Purpose of Disbursement  
Employment Ad

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2362**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

130.02

Full Name (Last, First, Middle Initial)

**B.** Angelica C Anderson

Mailing Address 4106 Fillmore Ln

City Davenport State IA Zip Code 52806-4524

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2499**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

396.03

Full Name (Last, First, Middle Initial)

**C.** Angelica C Anderson

Mailing Address 4106 Fillmore Ln

City Davenport State IA Zip Code 52806-4524

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2456**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

291.22

**SUBTOTAL** of Disbursements This Page (optional) .....

817.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)  
Kevin Bangert

Mailing Address 311 S 3rd St

City State Zip Code  
Burlington IA 52601-5523

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2376

Date of Disbursement

/   /

Amount of Each Disbursement this Period

167.56

B. Full Name (Last, First, Middle Initial)  
Adam B Zimmerman

Mailing Address 1434 Grand Ave

City State Zip Code  
Iowa City IA 52246-1912

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2452

Date of Disbursement

/   /

Amount of Each Disbursement this Period

288.20

C. Full Name (Last, First, Middle Initial)  
Adam B Zimmerman

Mailing Address 1434 Grand Ave

City State Zip Code  
Iowa City IA 52246-1912

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D2529

Date of Disbursement

/   /

Amount of Each Disbursement this Period

430.27

SUBTOTAL of Disbursements This Page (optional) .....

886.03

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel T Simmons		<b>Transaction ID:</b> D2288 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 1913 Albert St N		<b>Amount of Each Disbursement this Period</b> <div>34.56</div>
City Falcon Heights State MN Zip Code 55113-6166		
Purpose of Disbursement Reimbursement/Travel		
Candidate Name		
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>		
<b>B.</b> Full Name (Last, First, Middle Initial) Daniel T Simmons		<b>Transaction ID:</b> D2725 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 1913 Albert St N		<b>Amount of Each Disbursement this Period</b> <div>899.50</div>
City Falcon Heights State MN Zip Code 55113-6166		
Purpose of Disbursement Net Payroll		
Candidate Name		
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>		
<b>C.</b> Full Name (Last, First, Middle Initial) Robert L Hamill		<b>Transaction ID:</b> D2682 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 3407 Grand Ave Apt 122		<b>Amount of Each Disbursement this Period</b> <div>798.50</div>
City Des Moines State IA Zip Code 50312-4111		
Purpose of Disbursement Net Payroll		
Candidate Name		
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1732.56</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Robert L Hamill		<b>Transaction ID:</b> D2750 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 3407 Grand Ave Apt 122		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1017.03</td> </tr> </table>	1017.03																			
1017.03																						
City Des Moines State IA Zip Code 50312-4111																						
Purpose of Disbursement Net Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas J Bierlein		<b>Transaction ID:</b> D2383 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 108 Sandwood Crest Dr		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>180.26</td> </tr> </table>	180.26																			
180.26																						
City Castle Rock State WA Zip Code 98611-9461																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Thomas J Bierlein		<b>Transaction ID:</b> D2611 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 108 Sandwood Crest Dr		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>542.20</td> </tr> </table>	542.20																			
542.20																						
City Castle Rock State WA Zip Code 98611-9461																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>1739.49</td> </tr> </table>	1739.49																			
1739.49																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 99 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Gabriel J Whitaker</b> Full Name (Last, First, Middle Initial) Mailing Address 204 Jewel Dr Apt 5 City Ames State IA Zip Code 50010-8576 Purpose of Disbursement Net Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2608</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 4 Amount of Each Disbursement this Period 539.13
<b>B. Gabriel J Whitaker</b> Full Name (Last, First, Middle Initial) Mailing Address 204 Jewel Dr Apt 5 City Ames State IA Zip Code 50010-8576 Purpose of Disbursement Net Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2500</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 4 Amount of Each Disbursement this Period 396.43
<b>C. Jessie R Weishaar</b> Full Name (Last, First, Middle Initial) Mailing Address 1516 Otley Ave City Perry State IA Zip Code 50220-1751 Purpose of Disbursement Net Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2699</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 4 Amount of Each Disbursement this Period 829.62
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		1765.18
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 100 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Jessie R Weishaar		<b>Transaction ID:</b> D2283 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 1516 Otley Ave		<b>Amount of Each Disbursement this Period</b> <div>28.35</div>
City Perry State IA Zip Code 50220-1751		
Purpose of Disbursement Reimbursement/Travel	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Jessie R Weishaar		<b>Transaction ID:</b> D2701 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 1516 Otley Ave		<b>Amount of Each Disbursement this Period</b> <div>829.62</div>
City Perry State IA Zip Code 50220-1751		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Jessie R Weishaar		<b>Transaction ID:</b> D2265 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 1516 Otley Ave		<b>Amount of Each Disbursement this Period</b> <div>10.80</div>
City Perry State IA Zip Code 50220-1751		
Purpose of Disbursement Reimbursement/Travel	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>868.77</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 101 / 239

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Christian K Evans		<b>Transaction ID:</b> D2664 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 2105 Exchange St		<b>Amount of Each Disbursement this Period</b> <div>737.41</div>
City Keokuk State IA Zip Code 52632-2720		
Purpose of Disbursement Net payroll	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Christian K Evans		<b>Transaction ID:</b> D2620 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 2105 Exchange St		<b>Amount of Each Disbursement this Period</b> <div>556.30</div>
City Keokuk State IA Zip Code 52632-2720		
Purpose of Disbursement Net payroll	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Kathryn B Taber		<b>Transaction ID:</b> D2422 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address Coe College GMV 1046		<b>Amount of Each Disbursement this Period</b> <div>232.96</div>
City Cedar Rapids State IA Zip Code 52402		
Purpose of Disbursement Net Payroll	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**1526.67**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 102 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Nicholaos G Antonopoulos

Mailing Address 118 1/2 S Dubuque St  
Apt 8

City Iowa City State IA Zip Code 52240-4019

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2678**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

778.50

Full Name (Last, First, Middle Initial)

**B.** Nicholaos G Antonopoulos

Mailing Address 118 1/2 S Dubuque St  
Apt 8

City Iowa City State IA Zip Code 52240-4019

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2679**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

778.50

Full Name (Last, First, Middle Initial)

**C.** Anna M Casteel

Mailing Address 2201 Thunder Ridge Blvd  
Apt 12B

City Cedar Falls State IA Zip Code 50613-1892

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D2703**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

849.62

**SUBTOTAL** of Disbursements This Page (optional) .....

2406.62

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 103 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Anna M Casteel

Mailing Address 2201 Thunder Ridge Blvd  
Apt 12B

City Cedar Falls State IA Zip Code 50613-1892

Purpose of Disbursement  
Nte Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2704**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

849.62

Full Name (Last, First, Middle Initial)

**B.** Courtney M Rickert

Mailing Address 1306 34th St  
Apt 27

City Des Moines State IA Zip Code 50311-2722

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2666**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

739.70

Full Name (Last, First, Middle Initial)

**C.** Courtney M Rickert

Mailing Address 1306 34th St  
Apt 27

City Des Moines State IA Zip Code 50311-2722

Purpose of Disbursement  
Reimbursement/Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2336**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

96.39

**SUBTOTAL** of Disbursements This Page (optional) .....

1685.71

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Courtney M Rickert		<b>Transaction ID:</b> D2665 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 1306 34th St Apt 27		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>739.69</td> </tr> </table>	739.69																			
739.69																						
City Des Moines State IA Zip Code 50311-2722																						
Purpose of Disbursement Net Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Justin R Buell		<b>Transaction ID:</b> D2774 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 3249 Jackson St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1230.25</td> </tr> </table>	1230.25																			
1230.25																						
City San Francisco State CA Zip Code 94118-2016																						
Purpose of Disbursement Net Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Justin R Buell		<b>Transaction ID:</b> D2776 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 3249 Jackson St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1230.25</td> </tr> </table>	1230.25																			
1230.25																						
City San Francisco State CA Zip Code 94118-2016																						
Purpose of Disbursement Net Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>3200.19</td> </tr> </table>	3200.19																			
3200.19																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																				



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 105 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Shanan M Alper		<b>Transaction ID:</b> D2651 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 3009 23rd Street		<b>Amount of Each Disbursement this Period</b> <div>654.72</div>
City San Francisco State CA Zip Code 94110		
Purpose of Disbursement Net Payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Renner K Walker		<b>Transaction ID:</b> D2471 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 1922 80th St		<b>Amount of Each Disbursement this Period</b> <div>342.02</div>
City Windsor Heights State IA Zip Code 50322-5604		
Purpose of Disbursement Net Payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Renner K Walker		<b>Transaction ID:</b> D2417 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 1922 80th St		<b>Amount of Each Disbursement this Period</b> <div>228.73</div>
City Windsor Heights State IA Zip Code 50322-5604		
Purpose of Disbursement Net Payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1225.47</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 106 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Clint A Birkenholtz		<b>Transaction ID:</b> D2676 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>1</td><td>3</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 3386 Hunter Ave		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>768.12</td> </tr> </table>	768.12																			
768.12																						
City Newton State IA Zip Code 50208-8656	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Net Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>B.</b> Full Name (Last, First, Middle Initial) Clint A Birkenholtz		<b>Transaction ID:</b> D2677 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>3</td><td>1</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 3386 Hunter Ave		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>768.13</td> </tr> </table>	768.13																			
768.13																						
City Newton State IA Zip Code 50208-8656	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Net Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>C.</b> Full Name (Last, First, Middle Initial) Heather M Hargreaves		<b>Transaction ID:</b> D2656 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>1</td><td>3</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 1408 Locust St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>663.35</td> </tr> </table>	663.35																			
663.35																						
City Des Moines State IA Zip Code 50309-3014	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Net Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						

**SUBTOTAL** of Disbursements This Page (optional) .....

**2199.60**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 107 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Heather M Hargreaves		<b>Transaction ID:</b> D2756 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 1408 Locust St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1060.38</td> </tr> </table>	1060.38																			
1060.38																						
City Des Moines State IA Zip Code 50309-3014																						
Purpose of Disbursement Net Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Alissa B Brammer		<b>Transaction ID:</b> D2551 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 4303 Harwood Dr		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>461.75</td> </tr> </table>	461.75																			
461.75																						
City Des Moines State IA Zip Code 50312-2319																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Alissa B Brammer		<b>Transaction ID:</b> D2388 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 4303 Harwood Dr		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>184.70</td> </tr> </table>	184.70																			
184.70																						
City Des Moines State IA Zip Code 50312-2319																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>1706.83</td> </tr> </table>	1706.83																			
1706.83																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Matthew M Duffy

Mailing Address 3014 Roxboro Drive

City Ames State IA Zip Code 50010-4305

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2655**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

662.58

Full Name (Last, First, Middle Initial)

**B.** Matthew M Duffy

Mailing Address 3014 Roxboro Drive

City Ames State IA Zip Code 50010-4305

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2440**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

274.61

Full Name (Last, First, Middle Initial)

**C.** Justin K Ballard

Mailing Address 5216 Ida St

City Omaha State NE Zip Code 68152-2436

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2489**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

380.58

**SUBTOTAL** of Disbursements This Page (optional) .....

1317.77

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 109 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Justin K Ballard		<b>Transaction ID:</b> D2488 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>2</td><td>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 5216 Ida St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>380.57</td> </tr> </table>	380.57																			
380.57																						
City Omaha	State NE		Zip Code 68152-2436																			
Purpose of Disbursement Net payroll			<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																		
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Quad City Times		<b>Transaction ID:</b> D2426 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>0</td><td>3</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	3		2	0	0	4													
Mailing Address 1416 W 16th St Ste 103		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>239.35</td> </tr> </table>	239.35																			
239.35																						
City Davenport	State IA		Zip Code 52804-3652																			
Purpose of Disbursement Employment Ad			<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																		
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Christopher M Bowen		<b>Transaction ID:</b> D2781 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>1</td><td>3</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 2035 Sunnyside Ave		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1302.50</td> </tr> </table>	1302.50																			
1302.50																						
City Burlington	State IA		Zip Code 52601-2532																			
Purpose of Disbursement Net Payroll			<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																		
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

1922.42

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 110 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Christopher M Bowen		<b>Transaction ID:</b> D2694 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 2035 Sunnyside Ave		<b>Amount of Each Disbursement this Period</b> <div>816.50</div>
City Burlington State IA Zip Code 52601-2532		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Christopher M Bowen		<b>Transaction ID:</b> D2464 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 2035 Sunnyside Ave		<b>Amount of Each Disbursement this Period</b> <div>310.98</div>
City Burlington State IA Zip Code 52601-2532		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Andrew J Miller		<b>Transaction ID:</b> D2538 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 3015 Oakland Street		<b>Amount of Each Disbursement this Period</b> <div>443.28</div>
City Ames State IA Zip Code 50010-6392		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1570.76</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Andrew J Miller		<b>Transaction ID:</b> D2614 <b>Date of Disbursement</b> <div> <div>08</div> <div>24</div> <div>2004</div> </div>	
Mailing Address 3015 Oakland Street		<b>Amount of Each Disbursement this Period</b> <div>547.64</div>	
City Ames	State IA		Zip Code 50010-6392
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Sarah J Dumdei		<b>Transaction ID:</b> D2560 <b>Date of Disbursement</b> <div> <div>08</div> <div>10</div> <div>2004</div> </div>	
Mailing Address 2116 Olive St Apt 3		<b>Amount of Each Disbursement this Period</b> <div>470.99</div>	
City Cedar Falls	State IA		Zip Code 50613-3777
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Sarah J Dumdei		<b>Transaction ID:</b> D2438 <b>Date of Disbursement</b> <div> <div>08</div> <div>24</div> <div>2004</div> </div>	
Mailing Address 2116 Olive St Apt 3		<b>Amount of Each Disbursement this Period</b> <div>272.43</div>	
City Cedar Falls	State IA		Zip Code 50613-3777
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**1291.06**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 112 / 239

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Jesse G Harris		<b>Transaction ID:</b> D2739 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 975 Applewood Ln		<b>Amount of Each Disbursement this Period</b> <div>956.38</div>
City Waukee State IA Zip Code 50263-8267		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Jesse G Harris		<b>Transaction ID:</b> D2773 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 975 Applewood Ln		<b>Amount of Each Disbursement this Period</b> <div>1227.87</div>
City Waukee State IA Zip Code 50263-8267		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Ethan A Newlin		<b>Transaction ID:</b> D2589 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 200 Stanton Ave Apt 503		<b>Amount of Each Disbursement this Period</b> <div>501.97</div>
City Ames State IA Zip Code 50014-6806		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**2686.22**

**TOTAL** This Period (last page this line number only) ..... ►



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Ethan A Newlin		<b>Transaction ID:</b> D2491 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 200 Stanton Ave Apt 503		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>381.82</td> </tr> </table>	381.82																			
381.82																						
City Ames State IA Zip Code 50014-6806																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Matthew W Opad		<b>Transaction ID:</b> D2579 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 922 E Washington St Apt 4		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>496.85</td> </tr> </table>	496.85																			
496.85																						
City Iowa City State IA Zip Code 52240-5202																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Matthew W Opad		<b>Transaction ID:</b> D2617 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 922 E Washington St Apt 4		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>554.26</td> </tr> </table>	554.26																			
554.26																						
City Iowa City State IA Zip Code 52240-5202																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>1432.93</td> </tr> </table>	1432.93																			
1432.93																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Matthew L Thompson

Mailing Address 2522 Pierce Ave

City Ames State IA Zip Code 50010-4415

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2559**

Date of Disbursement

08 / 10 / 2004

Amount of Each Disbursement this Period

470.98

Full Name (Last, First, Middle Initial)

**B.** Matthew L Thompson

Mailing Address 2522 Pierce Ave

City Ames State IA Zip Code 50010-4415

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2428**

Date of Disbursement

08 / 24 / 2004

Amount of Each Disbursement this Period

243.37

Full Name (Last, First, Middle Initial)

**C.** Nicholas Saponara

Mailing Address 59 Dartmouth Ave

City Yonkers State NY Zip Code 10701-5605

Purpose of Disbursement  
Reimbursement/Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2594**

Date of Disbursement

08 / 13 / 2004

Amount of Each Disbursement this Period

512.23

**SUBTOTAL** of Disbursements This Page (optional) .....

1226.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Nicholas Saponara</b> Full Name (Last, First, Middle Initial) Mailing Address 59 Dartmouth Ave City Yonkers State NY Zip Code 10701-5605 Purpose of Disbursement Reimbursement/Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2296</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 4 Amount of Each Disbursement this Period 42.20
<b>B. Nicholas Saponara</b> Full Name (Last, First, Middle Initial) Mailing Address 59 Dartmouth Ave City Yonkers State NY Zip Code 10701-5605 Purpose of Disbursement Net Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2730</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 4 Amount of Each Disbursement this Period 908.50
<b>C. Jake D Friedrichsen</b> Full Name (Last, First, Middle Initial) Mailing Address 818 W Seerley Blvd City Cedar Falls State IA Zip Code 50613-3763 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2483</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 4 Amount of Each Disbursement this Period 376.01

**SUBTOTAL** of Disbursements This Page (optional) .....

**1326.71**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 116 / 239

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Jake D Friedrichsen</b>		<b>Transaction ID: D2603</b> <b>Date of Disbursement</b> <div> <div>08</div> <div>24</div> <div>2004</div> </div>	
Mailing Address <b>818 W Seerley Blvd</b>			
City <b>Cedar Falls</b>	State <b>IA</b>	Zip Code <b>50613-3763</b>	
Purpose of Disbursement Net payroll		<div> <div></div> <div>Category/ Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>527.83</div>	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Chase O Davidson</b>		<b>Transaction ID: D2616</b> <b>Date of Disbursement</b> <div> <div>08</div> <div>10</div> <div>2004</div> </div>	
Mailing Address <b>616 Benson St</b>			
City <b>Council Bluffs</b>	State <b>IA</b>	Zip Code <b>51501-1770</b>	
Purpose of Disbursement Net payroll		<div> <div></div> <div>Category/ Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>550.95</div>	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Brian T Christiansen</b>		<b>Transaction ID: D2607</b> <b>Date of Disbursement</b> <div> <div>08</div> <div>10</div> <div>2004</div> </div>	
Mailing Address <b>4725 Happy Hollow Ln</b>			
City <b>Lincoln</b>	State <b>NE</b>	Zip Code <b>68516-5125</b>	
Purpose of Disbursement Net payroll		<div> <div></div> <div>Category/ Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>535.77</div>	

**SUBTOTAL** of Disbursements This Page (optional) .....

**1614.55**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Brian T Christiansen		<b>Transaction ID:</b> D2459 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 4725 Happy Hollow Ln		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>298.22</td> </tr> </table>	298.22																			
298.22																						
City Lincoln State NE Zip Code 68516-5125																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Shayla Kasel		<b>Transaction ID:</b> D2762 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 2403 35th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1130.25</td> </tr> </table>	1130.25																			
1130.25																						
City Des Moines State IA Zip Code 50310-4550																						
Purpose of Disbursement Net Payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Shayla Kasel		<b>Transaction ID:</b> D2806 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 2403 35th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>3478.21</td> </tr> </table>	3478.21																			
3478.21																						
City Des Moines State IA Zip Code 50310-4550																						
Purpose of Disbursement Net Payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

4906.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Jon M Woodruff		<b>Transaction ID:</b> D2568 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		1	0		2	0	0	4														
Mailing Address 1243 34th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">481.02</td> </tr> </table>		481.02																			
481.02																							
City Des Moines State IA Zip Code 50311-2701	Purpose of Disbursement Net payroll Candidate Name	<input type="checkbox"/> Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>B.</b> Full Name (Last, First, Middle Initial) Jon M Woodruff		<b>Transaction ID:</b> D2490 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	4		2	0	0	4														
Mailing Address 1243 34th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">381.79</td> </tr> </table>		381.79																			
381.79																							
City Des Moines State IA Zip Code 50311-2701	Purpose of Disbursement Net payroll Candidate Name	<input type="checkbox"/> Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>C.</b> Full Name (Last, First, Middle Initial) Nathan J Biggs		<b>Transaction ID:</b> D2481 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		1	0		2	0	0	4														
Mailing Address 1211 W 18th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">372.81</td> </tr> </table>		372.81																			
372.81																							
City Cedar Falls State IA Zip Code 50613-3501	Purpose of Disbursement Net payroll Candidate Name	<input type="checkbox"/> Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>1235.62</td> </tr> </table>		1235.62																			
1235.62																							
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																					

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Nathan J Biggs

Mailing Address 1211 W 18th St

City Cedar Falls State IA Zip Code 50613-3501

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2484**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

376.42

Full Name (Last, First, Middle Initial)

**B.** Secretary of State

Mailing Address Hoover Building

City Des Moines State IA Zip Code 50319-0106

Purpose of Disbursement  
Voter File Update

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2292**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

39.68

Full Name (Last, First, Middle Initial)

**C.** Ezekiel L Furlong

Mailing Address 705 Maynard Ave

City Waterloo State IA Zip Code 50701-2121

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2752**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1023.50

**SUBTOTAL** of Disbursements This Page (optional) .....

1439.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 120 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Ezekiel L Furlong

Mailing Address 705 Maynard Ave

City Waterloo State IA Zip Code 50701-2121

Purpose of Disbursement

Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2754**

Date of Disbursement

08 / 31 / 2004

Amount of Each Disbursement this Period

1023.50

Full Name (Last, First, Middle Initial)

**B.** Roger J Crimmins

Mailing Address 418 1st St SE

City Mason City State IA Zip Code 50401-3931

Purpose of Disbursement

Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2742**

Date of Disbursement

08 / 13 / 2004

Amount of Each Disbursement this Period

988.50

Full Name (Last, First, Middle Initial)

**C.** Roger J Crimmins

Mailing Address 418 1st St SE

City Mason City State IA Zip Code 50401-3931

Purpose of Disbursement

Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2004  
☐ Primary ☐ General  
☒ Other (specify) ▼

**Transaction ID: D2743**

Date of Disbursement

08 / 31 / 2004

Amount of Each Disbursement this Period

988.50

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

3000.50

**TOTAL** This Period (last page this line number only) ..... ►



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Benedict M O'Meara</b> Full Name (Last, First, Middle Initial) Mailing Address 1670 Monticello Ct City Wheaton State IL Zip Code 60187-8235 Purpose of Disbursement Net Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2370</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 4 Amount of Each Disbursement this Period 146.23
<b>B. Shannon R Smith</b> Full Name (Last, First, Middle Initial) Mailing Address 3865 Woodland Ave Apt 5 City West Des Moines State IA Zip Code 50266-1986 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2570</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 4 Amount of Each Disbursement this Period 484.10
<b>C. Shannon R Smith</b> Full Name (Last, First, Middle Initial) Mailing Address 3865 Woodland Ave Apt 5 City West Des Moines State IA Zip Code 50266-1986 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2396</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 4 Amount of Each Disbursement this Period 212.88
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>843.21</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Jordan E Oster		<b>Transaction ID:</b> D2522 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 1637 NW 122nd St		<b>Amount of Each Disbursement this Period</b> <div>422.51</div>
City Clive State IA Zip Code 50325-8112	<div>Category/Type</div>	
Purpose of Disbursement Net payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Jordan E Oster		<b>Transaction ID:</b> D2557 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 1637 NW 122nd St		<b>Amount of Each Disbursement this Period</b> <div>470.12</div>
City Clive State IA Zip Code 50325-8112	<div>Category/Type</div>	
Purpose of Disbursement Net payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Andrew N Monson		<b>Transaction ID:</b> D2633 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 5621 S 170th St		<b>Amount of Each Disbursement this Period</b> <div>591.69</div>
City Omaha State NE Zip Code 68135-2257	<div>Category/Type</div>	
Purpose of Disbursement Net payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**1484.32**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Andrew N Monson		<b>Transaction ID:</b> D2485 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 5621 S 170th St		<b>Amount of Each Disbursement this Period</b> <div>376.57</div>
City Omaha State NE Zip Code 68135-2257		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Joseph L Jones, II		<b>Transaction ID:</b> D2788 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 900 65th St Apt 63		<b>Amount of Each Disbursement this Period</b> <div>1407.35</div>
City Windsor Heights State IA Zip Code 50312-1065		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph L Jones, II		<b>Transaction ID:</b> D2386 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 900 65th St Apt 63		<b>Amount of Each Disbursement this Period</b> <div>181.27</div>
City Windsor Heights State IA Zip Code 50312-1065		
Purpose of Disbursement Reimbursement/Travel	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1965.19</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Joseph L Jones, II		<b>Transaction ID:</b> D2786 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 900 65th St Apt 63		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1388.12</td> </tr> </table>	1388.12																			
1388.12																						
City Windsor Heights State IA Zip Code 50312-1065																						
Purpose of Disbursement Net Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Marion Times		<b>Transaction ID:</b> D2264 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	3		2	0	0	4													
Mailing Address 808 6th St Ste 1		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>10.80</td> </tr> </table>	10.80																			
10.80																						
City Marion State IA Zip Code 52302-5765																						
Purpose of Disbursement Employment Ad																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Wooi J See		<b>Transaction ID:</b> D2506 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 1019 Sioux Dr NW		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>402.07</td> </tr> </table>	402.07																			
402.07																						
City Cedar Rapids State IA Zip Code 52405-2338																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>1800.99</td> </tr> </table>	1800.99																			
1800.99																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Wooi J See

Mailing Address 1019 Sioux Dr NW

City Cedar Rapids State IA Zip Code 52405-2338

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2528**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

429.43

Full Name (Last, First, Middle Initial)

**B.** Alison R Hoyer

Mailing Address 504 W Monroe St

City Mt Pleasant State IA Zip Code 52641-2119

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2650**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

653.82

Full Name (Last, First, Middle Initial)

**C.** Alison R Hoyer

Mailing Address 504 W Monroe St

City Mt Pleasant State IA Zip Code 52641-2119

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2448**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

286.29

**SUBTOTAL** of Disbursements This Page (optional) .....

1369.54

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Clint D Albertsen		<b>Transaction ID:</b> D2668 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>	
Mailing Address 1607 Little John Cir Apt 6		<b>Amount of Each Disbursement this Period</b> <div>747.45</div>	
City Council Bluffs	State IA		Zip Code 51503-0533
Purpose of Disbursement Net Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
<b>B.</b> Full Name (Last, First, Middle Initial) Clint D Albertsen		<b>Transaction ID:</b> D2669 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>	
Mailing Address 1607 Little John Cir Apt 6		<b>Amount of Each Disbursement this Period</b> <div>747.45</div>	
City Council Bluffs	State IA		Zip Code 51503-0533
Purpose of Disbursement Net Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
<b>C.</b> Full Name (Last, First, Middle Initial) Brian A Hayden		<b>Transaction ID:</b> D2715 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>	
Mailing Address 1026 Central Ave		<b>Amount of Each Disbursement this Period</b> <div>883.50</div>	
City Fort Dodge	State IA		Zip Code 50501-4002
Purpose of Disbursement Net Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>2378.40</div>	
<b>TOTAL</b> This Period (last page this line number only) .....			

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Brian A Hayden

Mailing Address 1026 Central Ave

City Fort Dodge State IA Zip Code 50501-4002

Purpose of Disbursement

Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2718**

Date of Disbursement

08 / 31 / 2004

Amount of Each Disbursement this Period

883.50

Full Name (Last, First, Middle Initial)

**B.** Brad T Frevert

Mailing Address 2801 Woodland Ave

City West Des Moines State IA Zip Code 50266-2031

Purpose of Disbursement

Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2748**

Date of Disbursement

08 / 13 / 2004

Amount of Each Disbursement this Period

1013.46

Full Name (Last, First, Middle Initial)

**C.** Brad T Frevert

Mailing Address 2801 Woodland Ave

City West Des Moines State IA Zip Code 50266-2031

Purpose of Disbursement

Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2749**

Date of Disbursement

08 / 31 / 2004

Amount of Each Disbursement this Period

1013.46

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2910.42

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Margo A Johnston		<b>Transaction ID:</b> D2719 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 1500 Old House Rd		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>883.50</td> </tr> </table>	883.50																			
883.50																						
City Pasadena State CA Zip Code 91107-1519																						
Purpose of Disbursement Net Payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Benjamin B Schelling		<b>Transaction ID:</b> D2818 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 443 Leaches Point Rd		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>189.27</td> </tr> </table>	189.27																			
189.27																						
City Orland State ME Zip Code 04472-3665																						
Purpose of Disbursement Reimbursement/Travel	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Benjamin B Schelling		<b>Transaction ID:</b> D2820 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 443 Leaches Point Rd		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>883.50</td> </tr> </table>	883.50																			
883.50																						
City Orland State ME Zip Code 04472-3665																						
Purpose of Disbursement Net Payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>1956.27</td> </tr> </table>	1956.27																			
1956.27																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																				



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Benjamin B Schelling</b> Full Name (Last, First, Middle Initial) Mailing Address 443 Leaches Point Rd City Orland State ME Zip Code 04472-3665 Purpose of Disbursement Net Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2821</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 4 Amount of Each Disbursement this Period 883.50
<b>B. Wellmark</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 10353 City Des Moines State IA Zip Code 50306-0353 Purpose of Disbursement Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2680</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 4 Amount of Each Disbursement this Period 787.60
<b>C. Wellmark</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 10353 City Des Moines State IA Zip Code 50306-0353 Purpose of Disbursement Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2626</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 6 / 2 0 0 4 Amount of Each Disbursement this Period 572.80
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		2243.90
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Amy C Murray		<b>Transaction ID:</b> D2708 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 250 Courtyard Dr Apt 110		<b>Amount of Each Disbursement this Period</b> <div>863.50</div>
City State Zip Code Dakota Dunes SD 57049-5179		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Amy C Murray		<b>Transaction ID:</b> D2710 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 250 Courtyard Dr Apt 110		<b>Amount of Each Disbursement this Period</b> <div>863.50</div>
City State Zip Code Dakota Dunes SD 57049-5179		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Jayme A Sime		<b>Transaction ID:</b> D2393 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 1621 S Main St		<b>Amount of Each Disbursement this Period</b> <div>203.17</div>
City State Zip Code Burlington IA 52601-6124		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

1930.17

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Erica L Carnes		<b>Transaction ID:</b> D2571 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 153A Lark Ave		<b>Amount of Each Disbursement this Period</b> <div>484.58</div>
City Ames State IA Zip Code 50010-8032		
Purpose of Disbursement Net payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Erica L Carnes		<b>Transaction ID:</b> D2517 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 153A Lark Ave		<b>Amount of Each Disbursement this Period</b> <div>417.05</div>
City Ames State IA Zip Code 50010-8032		
Purpose of Disbursement Net payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Steven M Chasse		<b>Transaction ID:</b> D2784 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 2715 W. 66th Street South		<b>Amount of Each Disbursement this Period</b> <div>1354.60</div>
City Newton State IA Zip Code 50208		
Purpose of Disbursement Net Payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**2256.23**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Steven M Chasse		<b>Transaction ID:</b> D2785 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 2715 W. 66th Street South		<b>Amount of Each Disbursement this Period</b> <div>1354.60</div>
City Newton State IA Zip Code 50208		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Craig A Davis		<b>Transaction ID:</b> D2707 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 1800 Watrous Ave Apt 50B		<b>Amount of Each Disbursement this Period</b> <div>863.50</div>
City Des Moines State IA Zip Code 50315-3251		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Craig A Davis		<b>Transaction ID:</b> D2709 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 1800 Watrous Ave Apt 50B		<b>Amount of Each Disbursement this Period</b> <div>863.50</div>
City Des Moines State IA Zip Code 50315-3251		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

3081.60

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Joshua R Sims		<b>Transaction ID:</b> D2602 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 104 Crestview Dr			
City West Branch	State IA	Zip Code 52358-9648	<b>Amount of Each Disbursement this Period</b> <div>527.33</div>
Purpose of Disbursement Net payroll		<div>Category/Type</div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Joshua R Sims		<b>Transaction ID:</b> D2601 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 104 Crestview Dr			
City West Branch	State IA	Zip Code 52358-9648	<b>Amount of Each Disbursement this Period</b> <div>525.55</div>
Purpose of Disbursement Net payroll		<div>Category/Type</div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Andrew M Batt		<b>Transaction ID:</b> D2544 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 604 Roosevelt Ave			
City Council Bluffs	State IA	Zip Code 51503-1829	<b>Amount of Each Disbursement this Period</b> <div>452.31</div>
Purpose of Disbursement Net payroll		<div>Category/Type</div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

1505.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. USPS</b> Full Name (Last, First, Middle Initial) Mailing Address 1165 2nd Ave City Des Moines State IA Zip Code 50318-9704 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2735</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 4 Amount of Each Disbursement this Period 925.00
<b>B. USPS</b> Full Name (Last, First, Middle Initial) Mailing Address 1165 2nd Ave City Des Moines State IA Zip Code 50318-9704 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2372</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 4 Amount of Each Disbursement this Period 150.00
<b>C. USPS</b> Full Name (Last, First, Middle Initial) Mailing Address 1165 2nd Ave City Des Moines State IA Zip Code 50318-9704 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2736</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 4 Amount of Each Disbursement this Period 925.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Ben J Brady		<b>Transaction ID:</b> D2702 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 2707 Hampton St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>839.50</td> </tr> </table>	839.50																			
839.50																						
City Ames State IA Zip Code 50010-7132																						
Purpose of Disbursement Net payroll	<input type="checkbox"/> Category/ Type																					
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Ben J Brady		<b>Transaction ID:</b> D2745 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 2707 Hampton St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>998.19</td> </tr> </table>	998.19																			
998.19																						
City Ames State IA Zip Code 50010-7132																						
Purpose of Disbursement Net payroll	<input type="checkbox"/> Category/ Type																					
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Amy N Levy		<b>Transaction ID:</b> D2693 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 9848 Brookview Dr		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>816.50</td> </tr> </table>	816.50																			
816.50																						
City Urbandale State IA Zip Code 50322-6248																						
Purpose of Disbursement Net payroll	<input type="checkbox"/> Category/ Type																					
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

2654.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 136 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Amy N Levy		<b>Transaction ID:</b> D2406 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 9848 Brookview Dr		<b>Amount of Each Disbursement this Period</b> <div>218.66</div>
City Urbandale State IA Zip Code 50322-6248		
Purpose of Disbursement Reimbursement/Travel Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Amy N Levy		<b>Transaction ID:</b> D2272 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 9848 Brookview Dr		<b>Amount of Each Disbursement this Period</b> <div>16.00</div>
City Urbandale State IA Zip Code 50322-6248		
Purpose of Disbursement Reimbursement/Travel Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Amy N Levy		<b>Transaction ID:</b> D2758 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 9848 Brookview Dr		<b>Amount of Each Disbursement this Period</b> <div>1122.23</div>
City Urbandale State IA Zip Code 50322-6248		
Purpose of Disbursement Net payroll Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1356.89</div>
<b>TOTAL</b> This Period (last page this line number only) .....		



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 137 / 239

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Victoria A Reich</b> Full Name (Last, First, Middle Initial) Mailing Address 1519 29th St City Moline State IL Zip Code 61265-3317 Purpose of Disbursement Net Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2436</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 4 Amount of Each Disbursement this Period 258.58
<b>B. Amy M Gallmeyer</b> Full Name (Last, First, Middle Initial) Mailing Address 2425 Crane Creek Rd City Waterloo State IA Zip Code 50703-9257 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2604</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 4 Amount of Each Disbursement this Period 531.11
<b>C. Amy M Gallmeyer</b> Full Name (Last, First, Middle Initial) Mailing Address 2425 Crane Creek Rd City Waterloo State IA Zip Code 50703-9257 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2563</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 4 Amount of Each Disbursement this Period 473.93
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶		1263.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 138 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Joseph M Gilde		<b>Transaction ID:</b> D2472 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 9824 Oakdale Dr		<b>Amount of Each Disbursement this Period</b> <div>342.40</div>	
City Urbandale	State IA		Zip Code 50322
Purpose of Disbursement Net Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Erik T Balsbaugh		<b>Transaction ID:</b> D2536 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>	
Mailing Address 12 W Main St		<b>Amount of Each Disbursement this Period</b> <div>439.99</div>	
City Marshalltown	State IA		Zip Code 50158-4941
Purpose of Disbursement Net Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Jennifer A Rysdam		<b>Transaction ID:</b> D2561 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address Buena Vista University Box 2676		<b>Amount of Each Disbursement this Period</b> <div>472.55</div>	
City Storm Lake	State IA		Zip Code 50588
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**1254.94**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Jennifer A Rysdam		<b>Transaction ID:</b> D2618 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address Buena Vista University Box 2676		<b>Amount of Each Disbursement this Period</b> <div>554.26</div>	
City Storm Lake State IA Zip Code 50588	Purpose of Disbursement Net payroll Candidate Name	<input type="checkbox"/> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Nathan Zorowski		<b>Transaction ID:</b> D2327 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 6 / 2 0 0 4</div> </div>	
Mailing Address 219 Ash Ave		<b>Amount of Each Disbursement this Period</b> <div>81.00</div>	
City Ames State IA Zip Code 50014-7114	Purpose of Disbursement Reimbursement/Travel Candidate Name	<input type="checkbox"/> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Crystal M Ford		<b>Transaction ID:</b> D2443 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 452 Avon Ct		<b>Amount of Each Disbursement this Period</b> <div>278.99</div>	
City Colona State IL Zip Code 61241-9643	Purpose of Disbursement Net Payroll Candidate Name	<input type="checkbox"/> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**914.25**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 140 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Aaron S Zoellick		<b>Transaction ID:</b> D2613 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 650 Orchard Ct		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>544.87</td> </tr> </table>	544.87																			
544.87																						
City Iowa City State IA Zip Code 52246-5534																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Aaron S Zoellick		<b>Transaction ID:</b> D2567 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 650 Orchard Ct		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>480.22</td> </tr> </table>	480.22																			
480.22																						
City Iowa City State IA Zip Code 52246-5534																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Elizabeth Cervantes		<b>Transaction ID:</b> D2409 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 2321 Central Ave		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>223.05</td> </tr> </table>	223.05																			
223.05																						
City Bettendorf State IA Zip Code 52722-5061																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

1248.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 141 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Elisabeth N Lyons		<b>Transaction ID:</b> D2817 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>	
Mailing Address 82 Hathaway Cir		<b>Amount of Each Disbursement this Period</b> <div>185.25</div>	
City Arlington	State MA		Zip Code 02476-7251
Purpose of Disbursement Reimbursement/Travel			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Elisabeth N Lyons		<b>Transaction ID:</b> D2822 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>	
Mailing Address 82 Hathaway Cir		<b>Amount of Each Disbursement this Period</b> <div>943.50</div>	
City Arlington	State MA		Zip Code 02476-7251
Purpose of Disbursement Net Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) William T Pepper		<b>Transaction ID:</b> D2539 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 2483 Grande Ave SE		<b>Amount of Each Disbursement this Period</b> <div>443.43</div>	
City Cedar Rapids	State IA		Zip Code 52403-2817
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

1572.18

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 142 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Jeffrey D Yanecek		<b>Transaction ID:</b> D2615 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>1</td><td>3</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 785 Prospect Ct		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>550.53</td> </tr> </table>	550.53																			
550.53																						
City North Liberty State IA Zip Code 52317-9128																						
Purpose of Disbursement Reimbursement/Travel																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Jeffrey D Yanecek		<b>Transaction ID:</b> D2681 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>1</td><td>3</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 785 Prospect Ct		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>796.50</td> </tr> </table>	796.50																			
796.50																						
City North Liberty State IA Zip Code 52317-9128																						
Purpose of Disbursement Net Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Jeffrey D Yanecek		<b>Transaction ID:</b> D2711 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>3</td><td>1</td><td></td> <td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 785 Prospect Ct		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>873.45</td> </tr> </table>	873.45																			
873.45																						
City North Liberty State IA Zip Code 52317-9128																						
Purpose of Disbursement Net Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

2220.48

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 143 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Brianna J Crowley		<b>Transaction ID:</b> D2512 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 1104 Warwick Dr		<b>Amount of Each Disbursement this Period</b> <div>412.39</div>	
City Cedar Falls State IA Zip Code 50613-1647	Purpose of Disbursement Net payroll Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Brianna J Crowley		<b>Transaction ID:</b> D2663 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 1104 Warwick Dr		<b>Amount of Each Disbursement this Period</b> <div>731.44</div>	
City Cedar Falls State IA Zip Code 50613-1647	Purpose of Disbursement Net payroll Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Jesse Tangkpanya		<b>Transaction ID:</b> D2402 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 2604 Barlett Road		<b>Amount of Each Disbursement this Period</b> <div>217.03</div>	
City Iowa City State IA Zip Code 52246	Purpose of Disbursement Net Payroll Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**1360.86**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Jesse Tangkhpanya</b> Full Name (Last, First, Middle Initial) Mailing Address 2604 Barlett Road City Iowa City State IA Zip Code 52246 Purpose of Disbursement Net Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2622</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 4 Amount of Each Disbursement this Period 558.71
<b>B. Rachel E Madden</b> Full Name (Last, First, Middle Initial) Mailing Address 831 E Jefferson St Apt 12 City Iowa City State IA Zip Code 52245-2439 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2533</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 4 Amount of Each Disbursement this Period 435.26
<b>C. David J Groves</b> Full Name (Last, First, Middle Initial) Mailing Address 15 Beacon St City York Beach State ME Zip Code 03910 Purpose of Disbursement Net Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2819</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 4 Amount of Each Disbursement this Period 526.23

**SUBTOTAL** of Disbursements This Page (optional) .....

1520.20

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 145 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) DemStore.com		<b>Transaction ID:</b> D2521 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	2		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	2		2	0	0	4													
Mailing Address 5104 Macarthur Blvd NW		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>422.50</td> </tr> </table>	422.50																			
422.50																						
City Washington State DC Zip Code 20016-3316	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Grassroots Campaign Materials-Kerry Pres																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) DemStore.com		<b>Transaction ID:</b> D2593 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	6		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	6		2	0	0	4													
Mailing Address 5104 Macarthur Blvd NW		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>510.00</td> </tr> </table>	510.00																			
510.00																						
City Washington State DC Zip Code 20016-3316	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Grassroots Campaign Materials-Kerry Pres																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) DemStore.com		<b>Transaction ID:</b> D2630 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	9		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	9		2	0	0	4													
Mailing Address 5104 Macarthur Blvd NW		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>580.00</td> </tr> </table>	580.00																			
580.00																						
City Washington State DC Zip Code 20016-3316	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Grassroots Campaign Materials-Kerry Pres																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

1512.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) DemStore.com		<b>Transaction ID:</b> D2793 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 5104 Macarthur Blvd NW		<b>Amount of Each Disbursement this Period</b> <div>1717.00</div>
City Washington State DC Zip Code 20016-3316		
Purpose of Disbursement Grassroots Campaign Materials-Kerry Pres		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Jerodiah F Conley		<b>Transaction ID:</b> D2764 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 2418 Amherst Street		<b>Amount of Each Disbursement this Period</b> <div>1255.62</div>
City Des Moines State IA Zip Code 50313		
Purpose of Disbursement Net Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Jerodiah F Conley		<b>Transaction ID:</b> D2763 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 2418 Amherst Street		<b>Amount of Each Disbursement this Period</b> <div>1160.39</div>
City Des Moines State IA Zip Code 50313		
Purpose of Disbursement Net Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**4133.01**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Samuel C McCormally		<b>Transaction ID:</b> D2545 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 12828 Kettering Dr		<b>Amount of Each Disbursement this Period</b> <div>452.51</div>
City Herndon State VA Zip Code 20171-2447		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Samuel C McCormally		<b>Transaction ID:</b> D2424 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 12828 Kettering Dr		<b>Amount of Each Disbursement this Period</b> <div>235.49</div>
City Herndon State VA Zip Code 20171-2447		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Leslie Ann Spring		<b>Transaction ID:</b> D2510 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 2819 N Main St		<b>Amount of Each Disbursement this Period</b> <div>409.42</div>
City Davenport State IA Zip Code 52803-1127		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1097.42

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 148 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Leslie Ann Spring		<b>Transaction ID:</b> D2518 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 2819 N Main St		<b>Amount of Each Disbursement this Period</b> <div>420.19</div>
City Davenport State IA Zip Code 52803-1127		
Purpose of Disbursement Net payroll	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Kimberley K Boggus		<b>Transaction ID:</b> D2466 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 303 Willow Ave Apt 1		<b>Amount of Each Disbursement this Period</b> <div>323.22</div>
City Council Bluffs State IA Zip Code 51503-9072		
Purpose of Disbursement Net Payroll	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) George S Boatwright		<b>Transaction ID:</b> D2412 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 5320 Appomattox Rd Apt 3		<b>Amount of Each Disbursement this Period</b> <div>225.87</div>
City Davenport State IA Zip Code 52806-2331		
Purpose of Disbursement Net payroll	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>969.28</div>
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** George S Boatwright

Mailing Address 5320 Appomattox Rd  
Apt 3

City Davenport State IA Zip Code 52806-2331

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2548**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

455.93

Full Name (Last, First, Middle Initial)

**B.** Nicholas J Liker

Mailing Address 218 N Hyland Ave  
Apt 201

City Ames State IA Zip Code 50014-7452

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2507**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

406.34

Full Name (Last, First, Middle Initial)

**C.** Nicholas J Liker

Mailing Address 218 N Hyland Ave  
Apt 201

City Ames State IA Zip Code 50014-7452

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2547**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

454.37

**SUBTOTAL** of Disbursements This Page (optional) .....

1316.64

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 150 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Zachary J White		<b>Transaction ID:</b> D2549 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 821 W 28th St		<b>Amount of Each Disbursement this Period</b> <div>458.95</div>	
City Cedar Falls State IA Zip Code 50613-5018	Purpose of Disbursement Net Payroll Candidate Name	<input type="checkbox"/> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Zachary J White		<b>Transaction ID:</b> D2627 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 821 W 28th St		<b>Amount of Each Disbursement this Period</b> <div>572.89</div>	
City Cedar Falls State IA Zip Code 50613-5018	Purpose of Disbursement Net Payroll Candidate Name	<input type="checkbox"/> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Krista K Cousins		<b>Transaction ID:</b> D2531 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 6610 College Park Court, Apt. 4		<b>Amount of Each Disbursement this Period</b> <div>434.04</div>	
City Cedar Rapids State IA Zip Code 52404-5284	Purpose of Disbursement Net payroll Candidate Name	<input type="checkbox"/> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1465.88</div>	
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Krista K Cousins		<b>Transaction ID:</b> D2511 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 6610 College Park Court, Apt. 4		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>410.76</td> </tr> </table>	410.76																			
410.76																						
City Cedar Rapids State IA Zip Code 52404-5284																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>281.67</td> </tr> </table>	281.67																			
281.67																						
<b>B.</b> Full Name (Last, First, Middle Initial) Shannon K Griffiths																						
Mailing Address 2422 Hull Ave																						
City Des Moines State IA Zip Code 50317-3630																						
Purpose of Disbursement Net payroll		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>138.52</td> </tr> </table>	138.52																			
138.52																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>C.</b> Full Name (Last, First, Middle Initial) Shannon K Griffiths		<b>Transaction ID:</b> D2364 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 2422 Hull Ave		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>830.95</td> </tr> </table>	830.95																			
830.95																						
City Des Moines State IA Zip Code 50317-3630																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>830.95</td> </tr> </table>	830.95																			
830.95																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶																						
<b>TOTAL</b> This Period (last page this line number only) ..... ▶																						

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Josiah R Friction		<b>Transaction ID:</b> D2596 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 505 E Burlington St		<b>Amount of Each Disbursement this Period</b> <div>515.91</div>
City Iowa City State IA Zip Code 52240-1969		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Josiah R Friction		<b>Transaction ID:</b> D2562 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 505 E Burlington St		<b>Amount of Each Disbursement this Period</b> <div>473.90</div>
City Iowa City State IA Zip Code 52240-1969		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Amanda L Miller		<b>Transaction ID:</b> D2441 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 1133 Grand Blvd		<b>Amount of Each Disbursement this Period</b> <div>278.52</div>
City Cedar Falls State IA Zip Code 50613-4305		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**1268.33**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Amanda L Miller		<b>Transaction ID:</b> D2435 <b>Date of Disbursement</b> <div> <div>08</div> <div>24</div> <div>2004</div> </div>	
Mailing Address 1133 Grand Blvd		Amount of Each Disbursement this Period <div>255.81</div>	
City Cedar Falls	State IA		Zip Code 50613-4305
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Ann C Erickson		<b>Transaction ID:</b> D2581 <b>Date of Disbursement</b> <div> <div>08</div> <div>10</div> <div>2004</div> </div>	
Mailing Address 2602 18 St B		Amount of Each Disbursement this Period <div>497.75</div>	
City Moline	State IL		Zip Code 61265
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Ann C Erickson		<b>Transaction ID:</b> D2575 <b>Date of Disbursement</b> <div> <div>08</div> <div>24</div> <div>2004</div> </div>	
Mailing Address 2602 18 St B		Amount of Each Disbursement this Period <div>489.40</div>	
City Moline	State IL		Zip Code 61265
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1242.96</div>	
<b>TOTAL</b> This Period (last page this line number only) .....			

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A. Golden Krishna**

Mailing Address 3901 Stonebridge Rd

City State Zip Code  
West Des Moines IA 50265-3963

Purpose of Disbursement

Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2493**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

383.66

Full Name (Last, First, Middle Initial)

**B. Marcia L Nichols**

Mailing Address 5917 Greendale Pl  
Apt 203

City State Zip Code  
Johnston IA 50131-2020

Purpose of Disbursement

Net Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D26269**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2196.87

Full Name (Last, First, Middle Initial)

**C. Marcia L Nichols**

Mailing Address 5917 Greendale Pl  
Apt 203

City State Zip Code  
Johnston IA 50131-2020

Purpose of Disbursement

Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2801**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2877.75

**SUBTOTAL** of Disbursements This Page (optional) .....

5458.28

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Marcia L Nichols</b> Full Name (Last, First, Middle Initial) Mailing Address 5917 Greendale Pl Apt 203 City Johnston State IA Zip Code 50131-2020 Purpose of Disbursement Reimbursement/Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2353</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 4 Amount of Each Disbursement this Period 120.43
<b>B. Marcia L Nichols</b> Full Name (Last, First, Middle Initial) Mailing Address 5917 Greendale Pl Apt 203 City Johnston State IA Zip Code 50131-2020 Purpose of Disbursement Net Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2802</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 4 Amount of Each Disbursement this Period 2877.75
<b>C. Marcia L Nichols</b> Full Name (Last, First, Middle Initial) Mailing Address 5917 Greendale Pl Apt 203 City Johnston State IA Zip Code 50131-2020 Purpose of Disbursement Reimbursement/Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2394</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 4 Amount of Each Disbursement this Period 209.44
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		3207.62
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) John D McMillin		<b>Transaction ID:</b> D2487 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 821 W 28th St		<b>Amount of Each Disbursement this Period</b> <div>379.09</div>	
City Cedar Falls	State IA		Zip Code 50613-5018
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) John D McMillin		<b>Transaction ID:</b> D2399 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>	
Mailing Address 821 W 28th St		<b>Amount of Each Disbursement this Period</b> <div>216.09</div>	
City Cedar Falls	State IA		Zip Code 50613-5018
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) John D McMillin		<b>Transaction ID:</b> D2667 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 821 W 28th St		<b>Amount of Each Disbursement this Period</b> <div>746.84</div>	
City Cedar Falls	State IA		Zip Code 50613-5018
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**1342.02**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Kathryn M Williams		<b>Transaction ID:</b> D2400 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 7 Wenwood Ct		<b>Amount of Each Disbursement this Period</b> <div>216.64</div>	
City Council Bluffs	State IA		Zip Code 51503-5127
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Devon M Brown		<b>Transaction ID:</b> D2454 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 2104 Eastern Ave		<b>Amount of Each Disbursement this Period</b> <div>289.97</div>	
City Davenport	State IA		Zip Code 52803-2004
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Miranda R Davidson		<b>Transaction ID:</b> D2634 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 616 Benson St		<b>Amount of Each Disbursement this Period</b> <div>592.41</div>	
City Council Bluffs	State IA		Zip Code 51501-1770
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1099.02</div>	
<b>TOTAL</b> This Period (last page this line number only) .....			

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Abigail A Longstreet

Mailing Address 572 S Cedar Ave

City Elmhurst State IL Zip Code 60126-4136

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2772**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1216.46

Full Name (Last, First, Middle Initial)

**B.** Abigail A Longstreet

Mailing Address 572 S Cedar Ave

City Elmhurst State IL Zip Code 60126-4136

Purpose of Disbursement  
Reimbursement/Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2450**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

287.82

Full Name (Last, First, Middle Initial)

**C.** Abigail A Longstreet

Mailing Address 572 S Cedar Ave

City Elmhurst State IL Zip Code 60126-4136

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2712**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

875.60

**SUBTOTAL** of Disbursements This Page (optional) .....

2379.88

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Matthew C Lees</b> Full Name (Last, First, Middle Initial) Mailing Address 5848 Hunt Rd City Burlington State IA Zip Code 52601-8908 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2577</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 4 Amount of Each Disbursement this Period 494.07
<b>B. Matthew C Lees</b> Full Name (Last, First, Middle Initial) Mailing Address 5848 Hunt Rd City Burlington State IA Zip Code 52601-8908 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2632</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 4 Amount of Each Disbursement this Period 591.04
<b>C. Alan F Schultz</b> Full Name (Last, First, Middle Initial) Mailing Address 1635 26th St NW City Cedar Rapids State IA Zip Code 52405-1420 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D2574</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 4 Amount of Each Disbursement this Period 489.33
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		1574.44
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Gregory K Piklapp		<b>Transaction ID:</b> D2625 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>	
Mailing Address 1025 5th St			
City Boone	State IA	Zip Code 50036-2950	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>571.48</div>	
<b>B.</b> Full Name (Last, First, Middle Initial) Gregory K Piklapp		<b>Transaction ID:</b> D2377 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>	
Mailing Address 1025 5th St			
City Boone	State IA	Zip Code 50036-2950	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>169.50</div>	
<b>C.</b> Full Name (Last, First, Middle Initial) Devin M Walker		<b>Transaction ID:</b> D2312 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 331 Hillcrest Ave			
City Ames	State IA	Zip Code 50014-3578	
Purpose of Disbursement Net Payroll		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>60.03</div>	

**SUBTOTAL** of Disbursements This Page (optional) .....

**801.01**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Devin M Walker</b>		<b>Transaction ID: D2600</b> Date of Disbursement <div> <div>08</div> <div>24</div> <div>2004</div> </div>	
Mailing Address    331 Hillcrest Ave			
City <b>Ames</b>	State <b>IA</b>	Zip Code <b>50014-3578</b>	
Purpose of Disbursement Net Payroll		<div> <div>525.48</div> </div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:            District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Bethany A Inman</b>		<b>Transaction ID: D2305</b> Date of Disbursement <div> <div>08</div> <div>18</div> <div>2004</div> </div>	
Mailing Address    301 S 5th St Apt 346			
City <b>Ames</b>	State <b>IA</b>	Zip Code <b>50010-6826</b>	
Purpose of Disbursement Staff Training		<div> <div>50.00</div> </div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:            District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Keith E Nelson</b>		<b>Transaction ID: D2590</b> Date of Disbursement <div> <div>08</div> <div>10</div> <div>2004</div> </div>	
Mailing Address    531 Benjamin Blvd			
City <b>Pleasant Hill</b>	State <b>IA</b>	Zip Code <b>50327-2119</b>	
Purpose of Disbursement Net payroll		<div> <div>502.25</div> </div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:            District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**1077.73**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Keith E Nelson		<b>Transaction ID:</b> D2554 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>08 / 24 / 2004</div> </div>	
Mailing Address 531 Benjamin Blvd		<b>Amount of Each Disbursement this Period</b> <div>461.75</div>	
City Pleasant Hill	State IA		Zip Code 50327-2119
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Michael J Wolfe		<b>Transaction ID:</b> D2609 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>08 / 10 / 2004</div> </div>	
Mailing Address 1070 50th St Unit 1D		<b>Amount of Each Disbursement this Period</b> <div>539.91</div>	
City West Des Moines	State IA		Zip Code 50266-4900
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Hannah J Schoenthal-Muse		<b>Transaction ID:</b> D2753 <b>Date of Disbursement</b> <div> <div>MM / DD / YY</div> <div>08 / 13 / 2004</div> </div>	
Mailing Address 2102 44th St		<b>Amount of Each Disbursement this Period</b> <div>1023.50</div>	
City Des Moines	State IA		Zip Code 50310-3011
Purpose of Disbursement Net Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**2025.16**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Hannah J Schoenthal-Muse		<b>Transaction ID:</b> D2755 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 2102 44th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1023.50</td> </tr> </table>	1023.50																			
1023.50																						
City Des Moines State IA Zip Code 50310-3011	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Net Payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Hannah J Schoenthal-Muse		<b>Transaction ID:</b> D2279 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 2102 44th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>23.22</td> </tr> </table>	23.22																			
23.22																						
City Des Moines State IA Zip Code 50310-3011	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Reimbursement/Travel																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Andrew P Mertens		<b>Transaction ID:</b> D2658 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 316 Ridgeland Avenue, Apt. 1		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>690.41</td> </tr> </table>	690.41																			
690.41																						
City Iowa City State IA Zip Code 52246	<b>Category/Type</b> <table border="1"> <tr> <td></td> </tr> </table>																					
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<table border="1"> <tr> <td>1737.13</td> </tr> </table>	1737.13																			
1737.13																						
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Andrew P Mertens

Mailing Address 316 Ridgeland Avenue, Apt. 1

City State Zip Code  
Iowa City IA 52246

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2449**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 8 / 2 4 / 2 0 0 4

Amount of Each Disbursement this Period

286.29

Full Name (Last, First, Middle Initial)

**B.** Benjamin G Humphrey

Mailing Address 705 Maynard Ave

City State Zip Code  
Waterloo IA 50701-2121

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2722**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 8 / 1 3 / 2 0 0 4

Amount of Each Disbursement this Period

884.00

Full Name (Last, First, Middle Initial)

**C.** Benjamin G Humphrey

Mailing Address 705 Maynard Ave

City State Zip Code  
Waterloo IA 50701-2121

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2695**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 8 / 3 1 / 2 0 0 4

Amount of Each Disbursement this Period

816.50

**SUBTOTAL** of Disbursements This Page (optional) .....

1986.79

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Janet L Haselhoff		<b>Transaction ID:</b> D2787 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 3843 8th Pl		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1396.36</td> </tr> </table>	1396.36																			
1396.36																						
City Des Moines	State IA		Zip Code 50313-3338																			
Purpose of Disbursement Payroll			<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																		
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Joseph F Pieper		<b>Transaction ID:</b> D2726 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	3		2	0	0	4													
Mailing Address 3335 325th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>901.50</td> </tr> </table>	901.50																			
901.50																						
City Dexter	State IA		Zip Code 50070-7529																			
Purpose of Disbursement Net Payroll			<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																		
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph F Pieper		<b>Transaction ID:</b> D2728 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	1		2	0	0	4													
Mailing Address 3335 325th St		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>901.50</td> </tr> </table>	901.50																			
901.50																						
City Dexter	State IA		Zip Code 50070-7529																			
Purpose of Disbursement Net Payroll			<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																		
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>SUBTOTAL of Disbursements This Page (optional)</b> .....		<table border="1"> <tr> <td>3199.36</td> </tr> </table>	3199.36																			
3199.36																						
<b>TOTAL This Period (last page this line number only)</b> .....		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 166 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Lauren H Daumueller		<b>Transaction ID:</b> D2492 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 3801 Cottage Grove Ave		<b>Amount of Each Disbursement this Period</b> <div>383.25</div>
City Des Moines State IA Zip Code 50311-3605		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Lauren H Daumueller		<b>Transaction ID:</b> D2366 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 3801 Cottage Grove Ave		<b>Amount of Each Disbursement this Period</b> <div>138.53</div>
City Des Moines State IA Zip Code 50311-3605		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Megan E Heneke		<b>Transaction ID:</b> D2740 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 712 E Market St		<b>Amount of Each Disbursement this Period</b> <div>973.50</div>
City Iowa City State IA Zip Code 52245-2657		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1495.28</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 167 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

**A.** Megan E Heneke

Mailing Address 712 E Market St

City Iowa City State IA Zip Code 52245-2657

Purpose of Disbursement

Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2741**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

973.50

Full Name (Last, First, Middle Initial)

**B.** James M Thompson

Mailing Address 3619 Gunston Rd

City Alexandria State VA Zip Code 22302-2007

Purpose of Disbursement

Reimbursement/Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2268**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

14.57

Full Name (Last, First, Middle Initial)

**C.** James M Thompson

Mailing Address 3619 Gunston Rd

City Alexandria State VA Zip Code 22302-2007

Purpose of Disbursement

Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2717**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

883.50

**SUBTOTAL** of Disbursements This Page (optional) .....

1871.57

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 168 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) James M Thompson		<b>Transaction ID:</b> D2720 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 3619 Gunston Rd		<b>Amount of Each Disbursement this Period</b> <div>883.50</div>
City Alexandria State VA Zip Code 22302-2007		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Northern Iowan		<b>Transaction ID:</b> D2263 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address L011 Maucker Un		<b>Amount of Each Disbursement this Period</b> <div>10.00</div>
City Cedar Falls State IA Zip Code 50614-0001		
Purpose of Disbursement Employment Ad	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Mitchell D Lingo		<b>Transaction ID:</b> D2473 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 2535 Heather View Cir		<b>Amount of Each Disbursement this Period</b> <div>345.40</div>
City Marion State IA Zip Code 52302-6414		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1238.90</div>
<b>TOTAL</b> This Period (last page this line number only) .....		



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 169 / 239

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Mitchell D Lingo		<b>Transaction ID:</b> D2291 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 2535 Heather View Cir		<b>Amount of Each Disbursement this Period</b> <div>38.61</div>
City Marion State IA Zip Code 52302-6414		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Christopher A Sime		<b>Transaction ID:</b> D2515 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 803 Franklin St		<b>Amount of Each Disbursement this Period</b> <div>415.73</div>
City Cedar Falls State IA Zip Code 50613-2966		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Christopher A Sime		<b>Transaction ID:</b> D2652 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 803 Franklin St		<b>Amount of Each Disbursement this Period</b> <div>655.74</div>
City Cedar Falls State IA Zip Code 50613-2966		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL of Disbursements This Page (optional)</b> ..... ►		<div>1110.08</div>
<b>TOTAL This Period (last page this line number only)</b> ..... ►		<div></div>

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 170 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Joseph B Scully, III		<b>Transaction ID:</b> D2724 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>	
Mailing Address 926 Main St		<b>Amount of Each Disbursement this Period</b> <div>891.50</div>	
City Grinnell State IA Zip Code 50112-2048	Purpose of Disbursement Net Payroll Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Michael S Cooper		<b>Transaction ID:</b> D2535 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address 5811 Walnut Hill Ave		<b>Amount of Each Disbursement this Period</b> <div>438.67</div>	
City Des Moines State IA Zip Code 50312-1434	Purpose of Disbursement Net payroll Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Michael S Cooper		<b>Transaction ID:</b> D2534 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>	
Mailing Address 5811 Walnut Hill Ave		<b>Amount of Each Disbursement this Period</b> <div>438.66</div>	
City Des Moines State IA Zip Code 50312-1434	Purpose of Disbursement Net payroll Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1768.83</div>	
<b>TOTAL</b> This Period (last page this line number only) .....			

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Adriann E Gerardi		<b>Transaction ID:</b> D2698 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 1440 Blairs Ferry Rd NE		<b>Amount of Each Disbursement this Period</b> <div>829.62</div>
City Cedar Rapids State IA Zip Code 52402-1228		
Purpose of Disbursement Net Payroll	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Adriann E Gerardi		<b>Transaction ID:</b> D2700 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 1440 Blairs Ferry Rd NE		<b>Amount of Each Disbursement this Period</b> <div>829.62</div>
City Cedar Rapids State IA Zip Code 52402-1228		
Purpose of Disbursement Net Payroll	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Eric J Langston		<b>Transaction ID:</b> D2642 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 4257 Sunland Ct SE		<b>Amount of Each Disbursement this Period</b> <div>613.19</div>
City Cedar Rapids State IA Zip Code 52403-2119		
Purpose of Disbursement Net payroll	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**2272.43**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 172 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Eric J Langston		<b>Transaction ID:</b> D2407 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 4257 Sunland Ct SE		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>219.64</td> </tr> </table>	219.64																			
219.64																						
City Cedar Rapids State IA Zip Code 52403-2119																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Kathleen M List		<b>Transaction ID:</b> D2482 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 111 Sheldon Ave Apt 3		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>372.81</td> </tr> </table>	372.81																			
372.81																						
City Ames State IA Zip Code 50014-4065																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Kathleen M List		<b>Transaction ID:</b> D2427 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	4		2	0	0	4													
Mailing Address 111 Sheldon Ave Apt 3		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>241.97</td> </tr> </table>	241.97																			
241.97																						
City Ames State IA Zip Code 50014-4065																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

834.42

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 173 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Amanda A Hollis		<b>Transaction ID:</b> D2541 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	4													
Mailing Address 510 Billy Sunday Rd		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>449.93</td> </tr> </table>	449.93																			
449.93																						
City Ames State IA Zip Code 50010-8110																						
Purpose of Disbursement Net payroll																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>278.52</td> </tr> </table>	278.52																			
278.52																						
<b>B.</b> Full Name (Last, First, Middle Initial) Amanda A Hollis																						
Mailing Address 510 Billy Sunday Rd																						
City Ames State IA Zip Code 50010-8110																						
Purpose of Disbursement Net payroll		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>30.85</td> </tr> </table>	30.85																			
30.85																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>C.</b> Full Name (Last, First, Middle Initial) Burlington Hawkeye		<b>Transaction ID:</b> D2284 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	3		2	0	0	4													
Mailing Address PO Box 10		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>759.30</td> </tr> </table>	759.30																			
759.30																						
City Burlington State IA Zip Code 52601-0010																						
Purpose of Disbursement Employment Ad																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>759.30</td> </tr> </table>	759.30																			
759.30																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶																						
<b>TOTAL</b> This Period (last page this line number only) ..... ▶																						

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 174 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

## **A. The Daily Nonpareil**

Mailing Address 535 W Broadway  
Ste 300

City Council Bluffs State IA Zip Code 51503-0831

Purpose of Disbursement

Employment Ad

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2408**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

220.98

Full Name (Last, First, Middle Initial)

## **B. Christian Urrutia**

Mailing Address 630 N Dubuque St

City Iowa City State IA Zip Code 52245-1915

Purpose of Disbursement

Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2612**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

544.86

Full Name (Last, First, Middle Initial)

## **C. Christian Urrutia**

Mailing Address 630 N Dubuque St

City Iowa City State IA Zip Code 52245-1915

Purpose of Disbursement

Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D2624**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

564.48

**SUBTOTAL** of Disbursements This Page (optional) .....

1330.32

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 175 / 239

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Christian Urrutia		<b>Transaction ID:</b> D2645 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 630 N Dubuque St		<b>Amount of Each Disbursement this Period</b> <div>635.34</div>
City Iowa City State IA Zip Code 52245-1915		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Jessica L Ellerbach		<b>Transaction ID:</b> D2532 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 420 S Van Buren St #3		<b>Amount of Each Disbursement this Period</b> <div>435.06</div>
City Iowa City State IA Zip Code 52240		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Jessica L Ellerbach		<b>Transaction ID:</b> D2486 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 420 S Van Buren St #3		<b>Amount of Each Disbursement this Period</b> <div>376.78</div>
City Iowa City State IA Zip Code 52240		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL of Disbursements This Page (optional)</b> .....		<div>1447.18</div>
<b>TOTAL This Period (last page this line number only)</b> .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 176 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Lucas P Forte		<b>Transaction ID:</b> D2644 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 1124 Oakcrest St Apt 12		<b>Amount of Each Disbursement this Period</b> <div>635.06</div>
City Iowa City State IA Zip Code 52246-5165		
Purpose of Disbursement Net payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Lucas P Forte		<b>Transaction ID:</b> D2469 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 1124 Oakcrest St Apt 12		<b>Amount of Each Disbursement this Period</b> <div>337.44</div>
City Iowa City State IA Zip Code 52246-5165		
Purpose of Disbursement Net payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Maria G Navarro		<b>Transaction ID:</b> D2580 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 5673 18th St		<b>Amount of Each Disbursement this Period</b> <div>496.98</div>
City Bettendorf State IA Zip Code 52722-7531		
Purpose of Disbursement Net payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1469.48</div>
<b>TOTAL</b> This Period (last page this line number only) .....		



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Maria G Navarro		<b>Transaction ID:</b> D2419 <b>Date of Disbursement</b> <div> <div>08</div> <div>24</div> <div>2004</div> </div>	
Mailing Address 5673 18th St			
City Bettendorf	State IA	Zip Code 52722-7531	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>230.87</div>	
<b>B.</b> Full Name (Last, First, Middle Initial) Kathrine E Beno		<b>Transaction ID:</b> D2497 <b>Date of Disbursement</b> <div> <div>08</div> <div>10</div> <div>2004</div> </div>	
Mailing Address 580 S 35th St			
City West Des Moines	State IA	Zip Code 50265-2056	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>394.51</div>	
<b>C.</b> Full Name (Last, First, Middle Initial) Kathrine E Beno		<b>Transaction ID:</b> D2476 <b>Date of Disbursement</b> <div> <div>08</div> <div>24</div> <div>2004</div> </div>	
Mailing Address 580 S 35th St			
City West Des Moines	State IA	Zip Code 50265-2056	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>357.87</div>	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>983.25</div>	
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 178 / 239

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Rachel C Hardesty		<b>Transaction ID:</b> D2683 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 630 N 6th St Apt 212		<b>Amount of Each Disbursement this Period</b> <div>798.50</div>
City Burlington State IA Zip Code 52601-5053		
Purpose of Disbursement Net Payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Rachel C Hardesty		<b>Transaction ID:</b> D2686 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 630 N 6th St Apt 212		<b>Amount of Each Disbursement this Period</b> <div>798.50</div>
City Burlington State IA Zip Code 52601-5053		
Purpose of Disbursement Net Payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Jack N Herbert		<b>Transaction ID:</b> D2509 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 4</div> </div>
Mailing Address 327 E College St Apt 1718		<b>Amount of Each Disbursement this Period</b> <div>408.90</div>
City Iowa City State IA Zip Code 52240-1685		
Purpose of Disbursement Net payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>2005.90</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 179 / 239

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Jack N Herbert		<b>Transaction ID:</b> D2404 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 0 4</div> </div>
Mailing Address 327 E College St Apt 1718		Amount of Each Disbursement this Period <div>217.64</div>
City Iowa City State IA Zip Code 52240-1685		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Amanda R Mahnke		<b>Transaction ID:</b> D2765 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 4</div> </div>
Mailing Address 1800 Watrous Ave Apt 19C		Amount of Each Disbursement this Period <div>1199.25</div>
City Des Moines State IA Zip Code 50315-3217		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Amanda R Mahnke		<b>Transaction ID:</b> D2766 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 4</div> </div>
Mailing Address 1800 Watrous Ave Apt 19C		Amount of Each Disbursement this Period <div>1199.25</div>
City Des Moines State IA Zip Code 50315-3217		
Purpose of Disbursement Net Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**2616.14**

**TOTAL** This Period (last page this line number only) .....

	21b		22		23		24		25		26
	27		28a		28b		28c		29	X	30b

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**255827.30**

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 181 / 239

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Iowa Democratic Party - State Account

Nature of Debt (Purpose):  
Non-Federal Contribution  
owed to NF acco

Mailing Address 5661 Fleur Dr

City	State	ZIP Code
Des Moines	IA	50321-2841

Outstanding Balance Beginning This Period

1200.00

Transaction ID: D16550

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1200.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

1200.00

2) **TOTALS** This Period (last page this line number only)..... ▶

1200.00

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 182 / 239  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 IOWA DEMOCRATIC PARTY

NAME OF ACCOUNT  
 Iowa Democratic Party

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 8 / 2 3 / 2 0 0 4

**TOTAL AMOUNT TRANSFERRED**

7397.61

**BREAKDOWN OF TRANSFER RECEIVED**

i) **Total Administrative** .....

7397.61

Transaction ID: T1

ii) **Generic Voter Drive** .....

Transaction ID:

iii) **Exempt Activities** .....

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

**TOTAL** This Period (Administrative) .....

**TOTAL** This Period (Generic Voter Drive) .....

**TOTAL** This Period (Exempt Activities) .....

**TOTAL** This Period (Direct Fundraising) .....

**TOTAL** This Period (Direct Candidate Support) .....

**TOTAL** This Period (Public Communications Referring Only to Party) .....

**TOTAL** This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 183 / 239  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 IOWA DEMOCRATIC PARTY

NAME OF ACCOUNT  
 Iowa Democratic Party

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 8 / 2 4 / 2 0 0 4

TOTAL AMOUNT TRANSFERRED

10000.00

**BREAKDOWN OF TRANSFER RECEIVED**

i) **Total Administrative** .....

10000.00

Transaction ID: T20

ii) **Generic Voter Drive** .....

Transaction ID:

iii) **Exempt Activities** .....

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

**TOTAL** This Period (Administrative) .....

**TOTAL** This Period (Generic Voter Drive) .....

**TOTAL** This Period (Exempt Activities) .....

**TOTAL** This Period (Direct Fundraising) .....

**TOTAL** This Period (Direct Candidate Support) .....

**TOTAL** This Period (Public Communications Referring Only to Party) .....

**TOTAL** This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 184 / 239  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 IOWA DEMOCRATIC PARTY

NAME OF ACCOUNT  
 IDP House Truman  
 Fund

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 8 / 2 3 / 2 0 0 4

**TOTAL AMOUNT TRANSFERRED**

6680.97

**BREAKDOWN OF TRANSFER RECEIVED**

i) **Total Administrative** .....

6680.97

Transaction ID: T23

ii) **Generic Voter Drive** .....

Transaction ID:

iii) **Exempt Activities** .....

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

**TOTAL** This Period (Administrative) .....

**TOTAL** This Period (Generic Voter Drive) .....

**TOTAL** This Period (Exempt Activities) .....

**TOTAL** This Period (Direct Fundraising) .....

**TOTAL** This Period (Direct Candidate Support) .....

**TOTAL** This Period (Public Communications Referring Only to Party) .....

**TOTAL** This Period (Total Amount Transferred) .....



**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 185 / 239  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 IOWA DEMOCRATIC PARTY

NAME OF ACCOUNT  
 IDP Senate Majority  
 Fund

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 8 / 2 7 / 2 0 0 4

TOTAL AMOUNT TRANSFERRED

6352.73

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

6352.73

Transaction ID: T24

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

30431.31

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

30431.31

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 186 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Binder Electric

Mailing Address  
 2138 Lyon St

City State Zip Code  
 Des Moines IA 50317-5245

Purpose of Disbursement:  
 Parking Security Light Service

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 2 4 / 2 0 0 4

Transaction ID: D2790H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

534.24

949.76

1484.00

**B. Full Name (Last, First, Middle Initial)**  
 Mid American - 1408

Mailing Address  
 PO Box 8020

City State Zip Code  
 Davenport IA 52808-8020

Purpose of Disbursement:  
 Utilities

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 0 5 / 2 0 0 4

Transaction ID: D2798H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

768.67

1366.53

2135.20

**C. Full Name (Last, First, Middle Initial)**  
 Adriann E Gerardi

Mailing Address  
 1440 Blairs Ferry Rd NE

City State Zip Code  
 Cedar Rapids IA 52402-1228

Purpose of Disbursement:  
 Reimbursement/Mileage

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 3 1 / 2 0 0 4

Transaction ID: D2316H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

22.60

40.20

62.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1325.51

2356.49

3682.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 187 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Adriann E Gerardi

Mailing Address

1440 Blairs Ferry Rd NE

City	State	Zip Code
Cedar Rapids	IA	52402-1228

 Purpose of Disbursement:  
 Reimbursement/Mileage

Category/Type

 Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	3	/	2	0	0	4

Transaction ID: D2363H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.53		88.08		137.61

**B. Full Name (Last, First, Middle Initial)**  
 Smith's Sewer Servic

Mailing Address

PO Box 351

City	State	Zip Code
Johnston	IA	50131-0351

 Purpose of Disbursement:  
 Plumbing Repairs

Category/Type

 Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	5	/	2	0	0	4

Transaction ID: D2319H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.98		42.64		66.62

**C. Full Name (Last, First, Middle Initial)**  
 Roger J Crimmins

Mailing Address

418 1st St SE

City	State	Zip Code
Mason City	IA	50401-3931

 Purpose of Disbursement:  
 Reimbursement/Mileage

Category/Type

 Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	4

Transaction ID: D2374H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.76		97.36		152.12

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
128.27		228.08		356.35

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 188 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Roger J Crimmins

Mailing Address

418 1st St SE

City	State	Zip Code
Mason City	IA	50401-3931

Purpose of Disbursement:  
 Reimbursement/Mileage

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
1	3

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2317H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.22		41.28		64.50

**B. Full Name (Last, First, Middle Initial)**  
 Clint D Albertsen

Mailing Address

1607 Little John Cir Apt 6

City	State	Zip Code
Council Bluffs	IA	51503-0533

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2333H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.65		58.07		90.72

**C. Full Name (Last, First, Middle Initial)**  
 Clint D Albertsen

Mailing Address

1607 Little John Cir Apt 6

City	State	Zip Code
Council Bluffs	IA	51503-0533

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
1	3

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2351H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.89		74.48		116.37

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.76		173.83		271.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 189 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**

Qwest 319-235-3004

Mailing Address

PO Box 91104

City	State	Zip Code
Seattle	WA	98111-9204

Purpose of Disbursement:  
TelephonesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 05 / 2004

Transaction ID: D2759H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
405.30		720.54		1125.84

**B. Full Name (Last, First, Middle Initial)**

Acuity Insurance

Mailing Address

PO Box 718

City	State	Zip Code
Sheboygan	WI	53082-0718

Purpose of Disbursement:  
Insurance PremiumCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 13 / 2004

Transaction ID: D2799H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
893.24		1588.00		2481.24

**C. Full Name (Last, First, Middle Initial)**

Hotel Fort Des Moines

Mailing Address

1000 Walnut St

City	State	Zip Code
Des Moines	IA	50309-3424

Purpose of Disbursement:  
Food and BeverageCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 24 / 2004

Transaction ID: D2628H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
207.09		368.16		575.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1505.63		2676.70		4182.33

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 190 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 DSM Water Works

Mailing Address

2201 George Flagg Pkwy

City	State	Zip Code
Des Moines	IA	50321-1174

Purpose of Disbursement:  
 Water & Sewer Service

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	5

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2344H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.64		65.16		101.80

**B. Full Name (Last, First, Middle Initial)**  
 Qwest 319-752-3065

Mailing Address

PO Box 91104

City	State	Zip Code
Seattle	WA	98111-9204

Purpose of Disbursement:  
 Telephones

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2768H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
432.00		768.00		1200.00

**C. Full Name (Last, First, Middle Initial)**  
 Qwest 319-752-3065

Mailing Address

PO Box 91104

City	State	Zip Code
Seattle	WA	98111-9204

Purpose of Disbursement:  
 Telephones

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2355H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.65		77.60		121.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
512.29		910.76		1423.05

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 191 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
James Tanzosch

Mailing Address

926 Main St

 City State Zip Code  
Grinnell IA 50112-2048

 Purpose of Disbursement:  
Rent
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 24 / 2004

Transaction ID: D2460H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
108.00		192.00		300.00

**B. Full Name (Last, First, Middle Initial)**  
DSM Stamp

Mailing Address

PO Box 1798

 City State Zip Code  
Des Moines IA 50306-1798

 Purpose of Disbursement:  
Rubber Stamps
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 05 / 2004

Transaction ID: D2314H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.13		39.35		61.48

**C. Full Name (Last, First, Middle Initial)**  
Deluxe Business Form

Mailing Address

PO Box 742572

 City State Zip Code  
Cincinnati OH 45274-2572

 Purpose of Disbursement:  
Business Checks
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 10 / 2004

Transaction ID: D2273H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.94		10.56		16.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
136.07		241.91		377.98

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 192 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
Voxeo Corporation

Mailing Address

100 E Pine St Ste 600

 City State Zip Code  
Orlando FL 32801-2761

 Purpose of Disbursement:  
Web Hosting Service
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 05 / 2004

Transaction ID: D2586H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.00		320.00		500.00

**B. Full Name (Last, First, Middle Initial)**  
Qwest Political

Mailing Address

205 E Main St

 City State Zip Code  
Ottumwa IA 52501-2917

 Purpose of Disbursement:  
Telephones
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 03 / 2004

Transaction ID: D2767H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
432.00		768.00		1200.00

**C. Full Name (Last, First, Middle Initial)**  
Uline

Mailing Address

2200 S Lakeside Dr

 City State Zip Code  
Waukegan IL 60085-8361

 Purpose of Disbursement:  
Shipping boxes
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 05 / 2004

Transaction ID: D2345H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.39		66.49		103.88

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
649.39		1154.49		1803.88

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 193 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
LaserQuipt

Mailing Address

5500 NW Johnston Dr Ste C-D-E

 City State Zip Code  
Johnston IA 50131-1382

 Purpose of Disbursement:  
Printer repairs
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 05 / 2004

Transaction ID: D2418H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
83.10		147.75		230.85

**B. Full Name (Last, First, Middle Initial)**  
GB Holdings LLC

Mailing Address

1198 White St

 City State Zip Code  
Dubuque IA 52001-5036

 Purpose of Disbursement:  
Office Rent
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 24 / 2004

Transaction ID: D2503H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
144.00		256.00		400.00

**C. Full Name (Last, First, Middle Initial)**  
Qwest 563-322-1257

Mailing Address

PO Box 91104

 City State Zip Code  
Seattle WA 98111-9204

 Purpose of Disbursement:  
Telephones
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 05 / 2004

Transaction ID: D2414H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.95		145.71		227.66

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
309.05		549.46		858.51

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
Megan E Heneke

Mailing Address

712 E Market St

City

State

Zip Code

Iowa City

IA

52245-2657

Purpose of Disbursement:  
Reimbursement/TravelCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Activity or Event Identifier:  
Administrative

Date 08 / 31 / 2004

Transaction ID: D2329H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.18		55.45		86.63

**B. Full Name (Last, First, Middle Initial)**  
Megan E Heneke

Mailing Address

712 E Market St

City

State

Zip Code

Iowa City

IA

52245-2657

Purpose of Disbursement:  
Reimbursement/TravelCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Activity or Event Identifier:  
Administrative

Date 08 / 13 / 2004

Transaction ID: D2298H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.30		30.76		48.06

**C. Full Name (Last, First, Middle Initial)**  
Nicholaos G Antonopoulos

Mailing Address

118 1/2 S Dubuque St Apt 8

City

State

Zip Code

Iowa City

IA

52240-4019

Purpose of Disbursement:  
Reimbursement/MileageCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Activity or Event Identifier:  
Administrative

Date 08 / 13 / 2004

Transaction ID: D2300H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.96		31.93		49.89

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.44		118.14		184.58

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 195 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**

Nicholaos G Antonopoulos

## Mailing Address

118 1/2 S Dubuque St Apt 8

City	State	Zip Code
Iowa City	IA	52240-4019

Purpose of Disbursement:  
Reimbursement/MileageCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 31 / 2004

Transaction ID: D2371H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.17		94.53		147.70

**B. Full Name (Last, First, Middle Initial)**

Storey Kenworthy

## Mailing Address

309 Locust St

City	State	Zip Code
Des Moines	IA	50309-1723

Purpose of Disbursement:  
Office SuppliesCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 05 / 2004

Transaction ID: D2757H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
401.51		713.80		1115.31

**C. Full Name (Last, First, Middle Initial)**

Ezekiel L Furlong

## Mailing Address

705 Maynard Ave

City	State	Zip Code
Waterloo	IA	50701-2121

Purpose of Disbursement:  
Reimbursement/MileageCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 31 / 2004

Transaction ID: D2318H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.32		41.48		64.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
478.00		849.81		1327.81

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 196 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Ezekiel L Furlong

Mailing Address

705 Maynard Ave

City	State	Zip Code
Waterloo	IA	50701-2121

Purpose of Disbursement:  
 Reimbursement/Mileage

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
1	3

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2275H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.66

11.84

18.50

**B. Full Name (Last, First, Middle Initial)**  
 Scott County Democratic Central Commit

Mailing Address

3330 Tremont

City	State	Zip Code
Davenport	IA	52803

Purpose of Disbursement:  
 Rent

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2542H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

162.00

288.00

450.00

**C. Full Name (Last, First, Middle Initial)**  
 A-C Contractors

Mailing Address

PO Box 1404

City	State	Zip Code
Des Moines	IA	50305-1404

Purpose of Disbursement:  
 Air Conditioning Repairs

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	5

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2649H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

234.66

417.20

651.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

403.32

717.04

1120.36

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 197 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Ramsey J Green

Mailing Address

500 W Broadway Ste 100

City State Zip Code  
 Council Bluffs IA 51503-0819

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 3 1 / 2 0 0 4

Transaction ID: D2463H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

110.58

196.60

307.18

**B. Full Name (Last, First, Middle Initial)**  
 Cerro Gordo County Democratic Central

Mailing Address

943 6th St SE

City State Zip Code  
 Mason City IA 50401-4261

Purpose of Disbursement:  
 Telephones

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 2 4 / 2 0 0 4

Transaction ID: D2285H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

12.15

21.61

33.76

**C. Full Name (Last, First, Middle Initial)**  
 Cerro Gordo County Democratic Central

Mailing Address

943 6th St SE

City State Zip Code  
 Mason City IA 50401-4261

Purpose of Disbursement:  
 Rent

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 1 5 / 2 0 0 4

Transaction ID: D2392H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

72.00

128.00

200.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

194.73

346.21

540.94

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 198 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**

Qwest 712-388-1009

Mailing Address

PO Box 91104

City	State	Zip Code
Seattle	WA	98111-9204

Purpose of Disbursement:  
TelephonesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 05 / 2004

Transaction ID: D2789H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

514.20

914.15

1428.35

**B. Full Name (Last, First, Middle Initial)**

Domino's Pizza

Mailing Address

902 Army Post Road

City	State	Zip Code
Des Moines	IA	50315

Purpose of Disbursement:  
Food and BeverageCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 26 / 2004

Transaction ID: D2330H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

31.24

55.55

86.79

**C. Full Name (Last, First, Middle Initial)**

Domino's Pizza

Mailing Address

902 Army Post Road

City	State	Zip Code
Des Moines	IA	50315

Purpose of Disbursement:  
Food and BeverageCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 12 / 2004

Transaction ID: D2293H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

14.29

25.41

39.70

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

559.73

995.11

1554.84

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 199 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**

Domino's Pizza

Mailing Address

902 Army Post Road

City	State	Zip Code
Des Moines	IA	50315

Purpose of Disbursement:  
Food and BeverageCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 17 / 2004

Transaction ID: D2301H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.96		31.94		49.90

**B. Full Name (Last, First, Middle Initial)**

Domino's Pizza

Mailing Address

902 Army Post Road

City	State	Zip Code
Des Moines	IA	50315

Purpose of Disbursement:  
Food and BeverageCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 19 / 2004

Transaction ID: D2308H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.59		33.05		51.64

**C. Full Name (Last, First, Middle Initial)**

Office Max Credit Plan

Mailing Address

PO Box 9020

City	State	Zip Code
Des Moines	IA	50368-9020

Purpose of Disbursement:  
Office SuppliesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 03 / 2004

Transaction ID: D2657H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
247.45		439.92		687.37

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
284.00		504.91		788.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 200 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Marshall County Democratic Central Com

Mailing Address

205 North Center Street

City	State	Zip Code
Marshalltown	IA	50158

Purpose of Disbursement:  
 Rent & Telephones

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
2	7

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2672H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
270.00		480.00		750.00

**B. Full Name (Last, First, Middle Initial)**  
 Rachel C Hardesty

Mailing Address

630 N 6th St Apt 212

City	State	Zip Code
Burlington	IA	52601-5053

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2281H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.82		17.48		27.30

**C. Full Name (Last, First, Middle Initial)**  
 Rachel C Hardesty

Mailing Address

630 N 6th St Apt 212

City	State	Zip Code
Burlington	IA	52601-5053

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2525H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
153.86		273.55		427.41

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
433.68		771.03		1204.71

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 201 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
Rachel C Hardesty

Mailing Address

630 N 6th St Apt 212

 City State Zip Code  
Burlington IA 52601-5053

 Purpose of Disbursement:  
Reimbursement/Travel
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 0 4

Transaction ID: D2546H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
163.03		289.84		452.87

**B. Full Name (Last, First, Middle Initial)**  
James Boyd

Mailing Address

1902 Kingman Blvd

 City State Zip Code  
Des Moines IA 50311

 Purpose of Disbursement:  
Reimbursement/Travel
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 0 4

Transaction ID: D2332H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.80		56.54		88.34

**C. Full Name (Last, First, Middle Initial)**  
Waste Connections

Mailing Address

Des Moines District 3071 Dept. 1433

 City State Zip Code  
Los Angeles CA 90084-1433

 Purpose of Disbursement:  
Trash Service
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date M M / D D / Y Y Y Y  
0 8 / 1 5 / 2 0 0 4

Transaction ID: D2378H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.56		109.46		171.02

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
256.39		455.84		712.23

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 202 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Waste Connections

Mailing Address

Des Moines District 3071 Dept. 1433

City	State	Zip Code
Los Angeles	CA	90084-1433

Purpose of Disbursement:  
 Trash Service

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 15 / 2004

Transaction ID: D2379H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.56		109.46		171.02

**B. Full Name (Last, First, Middle Initial)**  
 Waste Connections

Mailing Address

Des Moines District 3071 Dept. 1433

City	State	Zip Code
Los Angeles	CA	90084-1433

Purpose of Disbursement:  
 Recycling Service

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 15 / 2004

Transaction ID: D2287H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.39		22.03		34.42

**C. Full Name (Last, First, Middle Initial)**  
 Waste Connections

Mailing Address

Des Moines District 3071 Dept. 1433

City	State	Zip Code
Los Angeles	CA	90084-1433

Purpose of Disbursement:  
 Recycling Service

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 15 / 2004

Transaction ID: D2286H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.39		22.03		34.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
86.34		153.52		239.86

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 203 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
The Des Moines Embassy Club

Mailing Address

801 Grand Ave Ste 4000

City	State	Zip Code
Des Moines	IA	50309-8000

Purpose of Disbursement:  
Century Club Breakfast

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

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D	D
0	5

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2640H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

218.45

388.36

606.81

**B. Full Name (Last, First, Middle Initial)**  
Service Master

Mailing Address

5510 NE 17th St

City	State	Zip Code
Des Moines	IA	50313-1614

Purpose of Disbursement:  
Carpet Cleaning

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	5

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2791H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

540.00

960.00

1500.00

**C. Full Name (Last, First, Middle Initial)**  
Janet L Haselhoff

Mailing Address

3843 8th Pl

City	State	Zip Code
Des Moines	IA	50313-3338

Purpose of Disbursement:  
Travel Reimbursement

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2619H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

199.77

355.17

554.94

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

958.22

1703.53

2661.75

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 204 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**

Carrie R Giddins

Mailing Address

4225 Fleur Drive #238

City

State

Zip Code

Des Moines

IA

50321

Purpose of Disbursement:  
Travel ReimbursementCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date

M M

0 8

D D

3 1

Y Y

2 0

0 4

Transaction ID: D2690H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

289.70

515.04

804.74

**B. Full Name (Last, First, Middle Initial)**

Carrie R Giddins

Mailing Address

4225 Fleur Drive #238

City

State

Zip Code

Des Moines

IA

50321

Purpose of Disbursement:  
Reimbursement/MileageCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date

M M

0 8

D D

1 3

Y Y

2 0

0 4

Transaction ID: D2411H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

81.01

144.03

225.04

**C. Full Name (Last, First, Middle Initial)**

Anna M Casteel

Mailing Address

2201 Thunder Ridge Blvd Apt 12B

City

State

Zip Code

Cedar Falls

IA

50613-1892

Purpose of Disbursement:  
Reimbursement/MileageCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date

M M

0 8

D D

1 3

Y Y

2 0

0 4

Transaction ID: D2267H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

4.43

7.88

12.31

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

375.14

666.95

1042.09

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 205 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
Koch Brothers

 Mailing Address  
PO Box 1755

 City State Zip Code  
Des Moines IA 50306-1755

 Purpose of Disbursement:  
Copy Machine Maintenance
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 30 / 2004

Transaction ID: D2566H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
171.72		305.28		477.00

**B. Full Name (Last, First, Middle Initial)**  
Koch Brothers

 Mailing Address  
PO Box 1755

 City State Zip Code  
Des Moines IA 50306-1755

 Purpose of Disbursement:  
Copy machine maintenance
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 05 / 2004

Transaction ID: D2425H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.86		152.64		238.50

**C. Full Name (Last, First, Middle Initial)**  
Qwest 319-363-5078

 Mailing Address  
PO Box 91104

 City State Zip Code  
Seattle WA 98111-9204

 Purpose of Disbursement:  
Telephones
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 05 / 2004

Transaction ID: D2689H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
289.18		514.12		803.30

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
546.76		972.04		1518.80

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 206 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Sarah J Donahue

Mailing Address

100 N 4th St

City

State

Zip Code

Burlington

IA

52601-5502

Purpose of Disbursement:  
 Reimbursement/Mileage

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 31 / 2004

Transaction ID: D2453H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

103.94

184.79

288.73

**B. Full Name (Last, First, Middle Initial)**  
 Sarah J Donahue

Mailing Address

100 N 4th St

City

State

Zip Code

Burlington

IA

52601-5502

Purpose of Disbursement:  
 Reimbursement/Mileage

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 13 / 2004

Transaction ID: D2385H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

65.18

115.90

181.08

**C. Full Name (Last, First, Middle Initial)**  
 Qwest Political

Mailing Address

208 Pine St

City

State

Zip Code

Muscatine

IA

52761-3707

Purpose of Disbursement:  
 Telephones

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 16 / 2004

Transaction ID: D2770H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

432.00

768.00

1200.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

601.12

1068.69

1669.81

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 207 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Qwest 515-558-9580

Mailing Address

PO Box 91104

City	State	Zip Code
Seattle	WA	98111-9204

Purpose of Disbursement:  
 Telephones

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	5

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2731H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

331.41

589.19

920.60

**B. Full Name (Last, First, Middle Initial)**  
 Feaster, Inc

Mailing Address

PO Box 281 PO Box 281

City	State	Zip Code
Grimes	IA	50111-0281

Purpose of Disbursement:  
 Field Office Property Insurance - Locust

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2395H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

76.32

135.68

212.00

**C. Full Name (Last, First, Middle Initial)**  
 Feaster, Inc

Mailing Address

PO Box 281 PO Box 281

City	State	Zip Code
Grimes	IA	50111-0281

Purpose of Disbursement:  
 Field Office Rent - 1408 Locust

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2797H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

720.00

1280.00

2000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1127.73

2004.87

3132.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 208 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
Feaster, Inc

Mailing Address

PO Box 281 PO Box 281

 City State Zip Code  
Grimes IA 50111-0281

 Purpose of Disbursement:  
Field Office Utilities - 1408 Locust
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 02 / 2004

Transaction ID: D2368H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.01		90.70		141.71

**B. Full Name (Last, First, Middle Initial)**  
Boston Marriott Long Wharf

Mailing Address

296 State St

 City State Zip Code  
Boston MA 02109-2607

 Purpose of Disbursement:  
Travel/Hotel
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 04 / 2004

Transaction ID: D2811H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2610.41		4640.73		7251.14

**C. Full Name (Last, First, Middle Initial)**  
Wapello County Democratic Central Comm

Mailing Address

512 N Ferry St

 City State Zip Code  
Ottumwa IA 52501-4107

 Purpose of Disbursement:  
Rent
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 02 / 2004

Transaction ID: D2746H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.00		640.00		1000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3021.42		5371.43		8392.85

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 209 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Qwest Political

Mailing Address

1314 Douglas St FI 14

City	State	Zip Code
Omaha	NE	68102-1816

Purpose of Disbursement:  
TelephonesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 16 / 2004

Transaction ID: D2321H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

25.92

46.08

72.00

**B. Full Name (Last, First, Middle Initial)**  
 Qwest Political

Mailing Address

1314 Douglas St FI 14

City	State	Zip Code
Omaha	NE	68102-1816

Purpose of Disbursement:  
TelephonesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 16 / 2004

Transaction ID: D2354H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

43.56

77.44

121.00

**C. Full Name (Last, First, Middle Initial)**  
 Qwest Political

Mailing Address

1314 Douglas St FI 14

City	State	Zip Code
Omaha	NE	68102-1816

Purpose of Disbursement:  
TelephonesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 03 / 2004

Transaction ID: D2391H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

69.57

123.68

193.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

139.05

247.20

386.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 210 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
Qwest Political

Mailing Address

1314 Douglas St FI 14

City State Zip Code  
Omaha NE 68102-1816

Purpose of Disbursement:  
Telephones

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date  /  /

Transaction ID: D2322H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="25.92"/>		<input type="text" value="46.08"/>		<input type="text" value="72.00"/>

**B. Full Name (Last, First, Middle Initial)**  
Qwest 515-233-3909

Mailing Address

PO Box 91104

City State Zip Code  
Seattle WA 98111-9204

Purpose of Disbursement:  
Telephones

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date  /  /

Transaction ID: D2302H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="18.00"/>		<input type="text" value="32.00"/>		<input type="text" value="50.00"/>

**C. Full Name (Last, First, Middle Initial)**  
Qwest 515-233-3909

Mailing Address

PO Box 91104

City State Zip Code  
Seattle WA 98111-9204

Purpose of Disbursement:  
Telephones

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date  /  /

Transaction ID: D2277H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="7.92"/>		<input type="text" value="14.08"/>		<input type="text" value="22.00"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="51.84"/>		<input type="text" value="92.16"/>		<input type="text" value="144.00"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 211 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Qwest 515-233-3909

Mailing Address

PO Box 91104

City	State	Zip Code
Seattle	WA	98111-9204

Purpose of Disbursement:  
 Telephones

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	5

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2662H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
258.22		459.07		717.29

**B. Full Name (Last, First, Middle Initial)**  
 Benjamin G Humphrey

Mailing Address

705 Maynard Ave

City	State	Zip Code
Waterloo	IA	50701-2121

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2323H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.82		47.70		74.52

**C. Full Name (Last, First, Middle Initial)**  
 IA Telecom

Mailing Address

108 W 3rd St S

City	State	Zip Code
Newton	IA	50208-3740

Purpose of Disbursement:  
 Telephones

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2771H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
432.00		768.00		1200.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
717.04		1274.77		1991.81

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 212 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Qwest 712-258-2473

Mailing Address

PO Box 91104

City	State	Zip Code
Seattle	WA	98111-9204

Purpose of Disbursement:  
 Telephones

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	5

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2430H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
88.37		157.12		245.49

**B. Full Name (Last, First, Middle Initial)**  
 Jerodiah F Conley

Mailing Address

2418 Amherst Street

City	State	Zip Code
Des Moines	IA	50313

Purpose of Disbursement:  
 Reimbursement/Mileage

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2439H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.36		174.88		273.24

**C. Full Name (Last, First, Middle Initial)**  
 GE Capital

Mailing Address

PO Box 740441

City	State	Zip Code
Atlanta	GA	30374-0441

Purpose of Disbursement:  
 Copier Equipment Lease

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2647H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
232.62		413.55		646.17

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
419.35		745.55		1164.90

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 213 / 239  
FOR LINE 21a OF FORM 3X

 NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
GE Capital

 Mailing Address  
PO Box 740441

 City State Zip Code  
Atlanta GA 30374-0441

 Purpose of Disbursement:  
Copier Equipment Lease

 Category/  
Type

 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 02 / 2004

Transaction ID: D2643H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
221.19		393.24		614.43

**B. Full Name (Last, First, Middle Initial)**  
Qwest0065

 Mailing Address  
PO Box 12480

 City State Zip Code  
Seattle WA 98111-4480

 Purpose of Disbursement:  
DSL Service

 Category/  
Type

 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 05 / 2004

Transaction ID: D2357H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.81		77.89		121.70

**C. Full Name (Last, First, Middle Initial)**  
Qwest Political

 Mailing Address  
12 W Main St

 City State Zip Code  
Marshalltown IA 50158-4941

 Purpose of Disbursement:  
Telephones

 Category/  
Type

 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date MM / DD / YYYY  
08 / 16 / 2004

Transaction ID: D2639H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
216.00		384.00		600.00

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
481.00		855.13		1336.13

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 214 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 IA Telecom

Mailing Address

926 Main St

City	State	Zip Code
Grinnell	IA	50112-2048

Purpose of Disbursement:  
 Telephones

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2769H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
432.00		768.00		1200.00

**B. Full Name (Last, First, Middle Initial)**  
 Qwest Political

Mailing Address

224 22nd Pl

City	State	Zip Code
Clinton	IA	52732-6105

Purpose of Disbursement:  
 Telephones

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2638H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
216.00		384.00		600.00

**C. Full Name (Last, First, Middle Initial)**  
 Polk County Conventi

Mailing Address

501 Grand Ave

City	State	Zip Code
Des Moines	IA	50309-2406

Purpose of Disbursement:  
 Food and Beverage

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	4

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2794H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
631.48		1122.64		1754.12

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1279.48		2274.64		3554.12

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 215 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
Polk County Conventi

Mailing Address

501 Grand Ave

City	State	Zip Code
Des Moines	IA	50309-2406

Purpose of Disbursement:  
Food and BeverageCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 05 / 2004

Transaction ID: D2808H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1440.00		2560.00		4000.00

**B. Full Name (Last, First, Middle Initial)**  
Polk County Conventi

Mailing Address

501 Grand Ave

City	State	Zip Code
Des Moines	IA	50309-2406

Purpose of Disbursement:  
Food and BeverageCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 30 / 2004

Transaction ID: D2805H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1185.58		2107.70		3293.28

**C. Full Name (Last, First, Middle Initial)**  
Seth A Brooks

Mailing Address

3828 Cass St Apt 5

City	State	Zip Code
Omaha	NE	68131-1851

Purpose of Disbursement:  
Reimbursement/MileageCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 31 / 2004

Transaction ID: D2306H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.46		32.84		51.30

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2644.04		4700.54		7344.58

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 216 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Seth A Brooks

Mailing Address

3828 Cass St Apt 5

City	State	Zip Code
Omaha	NE	68131-1851

Purpose of Disbursement:  
 Reimbursement/Mileage

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
1	3

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2445H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
101.57		180.58		282.15

**B. Full Name (Last, First, Middle Initial)**  
 Janelle M Domeyer

Mailing Address

1916 Parkwild Dr Apt 50

City	State	Zip Code
Council Bluffs	IA	51503-1875

Purpose of Disbursement:  
 Reimbursement/Mileage

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
1	3

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2315H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.45		39.93		62.38

**C. Full Name (Last, First, Middle Initial)**  
 UPS

Mailing Address

PO Box 577

City	State	Zip Code
Carol Stream	IL	60132-0001

Purpose of Disbursement:  
 Shipping Fees

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	7

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2537H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
159.00		282.69		441.69

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
283.02		503.20		786.22

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 217 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 UPS

Mailing Address  
 PO Box 577

City State Zip Code  
 Carol Stream IL 60132-0001

Purpose of Disbursement:  
 Shipping Fees

Category/  
 Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date MM / DD / YYYY  
 08 / 14 / 2004

Transaction ID: D2410H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.61		143.32		223.93

**B. Full Name (Last, First, Middle Initial)**  
 UPS

Mailing Address  
 PO Box 577

City State Zip Code  
 Carol Stream IL 60132-0001

Purpose of Disbursement:  
 Shipping Fees

Category/  
 Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date MM / DD / YYYY  
 08 / 27 / 2004

Transaction ID: D2403H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.34		139.29		217.63

**C. Full Name (Last, First, Middle Initial)**  
 UPS

Mailing Address  
 PO Box 577

City State Zip Code  
 Carol Stream IL 60132-0001

Purpose of Disbursement:  
 Shipping Fees

Category/  
 Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date MM / DD / YYYY  
 08 / 06 / 2004

Transaction ID: D2431H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.36		160.66		251.02

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
249.31		443.27		692.58

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 218 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 UPS

Mailing Address  
 PO Box 577

City State Zip Code  
 Carol Stream IL 60132-0001

Purpose of Disbursement:  
 Shipping Fees

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date MM / DD / YYYY  
 08 / 19 / 2004

Transaction ID: D2337H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.87		62.01		96.88

**B. Full Name (Last, First, Middle Initial)**  
 U.S. Coffee

Mailing Address  
 5140 Park Ave Ste J

City State Zip Code  
 Des Moines IA 50321-1280

Purpose of Disbursement:  
 Coffee and Water

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date MM / DD / YYYY  
 08 / 05 / 2004

Transaction ID: D2416H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.26		146.24		228.50

**C. Full Name (Last, First, Middle Initial)**  
 Joseph L Jones, II

Mailing Address  
 900 65th St Apt 63

City State Zip Code  
 Windsor Heights IA 50312-1065

Purpose of Disbursement:  
 Reimbursement/Travel

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date MM / DD / YYYY  
 08 / 24 / 2004

Transaction ID: D2455H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.81		186.35		291.16

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
221.94		394.60		616.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 219 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Joseph L Jones, II

Mailing Address

900 65th St Apt 63

City State Zip Code  
 Windsor Heights IA 50312-1065

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 1 3 / 2 0 0 4

Transaction ID: D2433H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

90.72

161.30

252.02

**B. Full Name (Last, First, Middle Initial)**  
 Joseph L Jones, II

Mailing Address

900 65th St Apt 63

City State Zip Code  
 Windsor Heights IA 50312-1065

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 2 4 / 2 0 0 4

Transaction ID: D2269H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.31

9.46

14.77

**C. Full Name (Last, First, Middle Initial)**  
 Joseph L Jones, II

Mailing Address

900 65th St Apt 63

City State Zip Code  
 Windsor Heights IA 50312-1065

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 2 4 / 2 0 0 4

Transaction ID: D2271H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.51

9.81

15.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

101.54

180.57

282.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 220 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**

Joseph L Jones, II

## Mailing Address

900 65th St Apt 63

City	State	Zip Code
Windsor Heights	IA	50312-1065

Purpose of Disbursement:  
Reimbursement/TravelCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 24 / 2004

Transaction ID: D2289H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.47		23.95		37.42

**B. Full Name (Last, First, Middle Initial)**

Joseph L Jones, II

## Mailing Address

900 65th St Apt 63

City	State	Zip Code
Windsor Heights	IA	50312-1065

Purpose of Disbursement:  
Reimbursement/TravelCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 24 / 2004

Transaction ID: D2325H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.99		49.77		77.76

**C. Full Name (Last, First, Middle Initial)**

Joseph L Jones, II

## Mailing Address

900 65th St Apt 63

City	State	Zip Code
Windsor Heights	IA	50312-1065

Purpose of Disbursement:  
Reimbursement/TravelCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 24 / 2004

Transaction ID: D2359H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.03		78.28		122.31

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.49		152.00		237.49

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 221 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Joseph L Jones, II

Mailing Address

900 65th St Apt 63

City State Zip Code  
 Windsor Heights IA 50312-1065

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date  M  M /  D  D /  Y  Y  Y  Y  
 08 / 24 / 2004

Transaction ID: D2420H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

83.30

148.09

231.39

**B. Full Name (Last, First, Middle Initial)**  
 Joseph L Jones, II

Mailing Address

900 65th St Apt 63

City State Zip Code  
 Windsor Heights IA 50312-1065

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date  M  M /  D  D /  Y  Y  Y  Y  
 08 / 13 / 2004

Transaction ID: D2346H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

37.41

66.51

103.92

**C. Full Name (Last, First, Middle Initial)**  
 Joseph L Jones, II

Mailing Address

900 65th St Apt 63

City State Zip Code  
 Windsor Heights IA 50312-1065

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date  M  M /  D  D /  Y  Y  Y  Y  
 08 / 02 / 2004

Transaction ID: D2311H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21.60

38.40

60.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

142.31

253.00

395.31

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 222 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Joseph L Jones, II

Mailing Address

900 65th St Apt 63

City State Zip Code  
 Windsor Heights IA 50312-1065

Purpose of Disbursement:  
 Reimbursement/Travel

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date MM / DD / YYYY  
 08 / 02 / 2004

Transaction ID: D2405H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

78.57

139.70

218.27

**B. Full Name (Last, First, Middle Initial)**  
 Verizon 508022047

Mailing Address

PO Box 790406

City State Zip Code  
 Saint Louis MO 63179-0406

Purpose of Disbursement:  
 Telephones

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date MM / DD / YYYY  
 08 / 05 / 2004

Transaction ID: D2779H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

442.95

787.49

1230.44

**C. Full Name (Last, First, Middle Initial)**  
 Mediacom

Mailing Address

205 E Main St

City State Zip Code  
 Ottumwa IA 52501-2917

Purpose of Disbursement:  
 DSL Service

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date MM / DD / YYYY  
 08 / 03 / 2004

Transaction ID: D2381H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

64.76

115.14

179.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

586.28

1042.33

1628.61

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 223 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 ABC Disposal Systems

Mailing Address

113 Reynolds Pl

City	State	Zip Code
Hiawatha	IA	52233-1378

Purpose of Disbursement:  
 Trash Disposal Service

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
2	4

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2282H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.08		17.92		28.00

**B. Full Name (Last, First, Middle Initial)**  
 IPM Group

Mailing Address

1408 Locust St

City	State	Zip Code
Des Moines	IA	50309-3014

Purpose of Disbursement:  
 Parking

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2451H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
103.68		184.32		288.00

**C. Full Name (Last, First, Middle Initial)**  
 IPM Group

Mailing Address

1408 Locust St

City	State	Zip Code
Des Moines	IA	50309-3014

Purpose of Disbursement:  
 Parking

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2747H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.00		640.00		1000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
473.76		842.24		1316.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 224 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
Steven M Chasse

Mailing Address

2715 W. 66th Street South

 City State Zip Code  
Newton IA 50208

 Purpose of Disbursement:  
Reimbursement/Mileage
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date  /  / 

Transaction ID: D2475H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="124.99"/>		<input type="text" value="222.22"/>		<input type="text" value="347.21"/>

**B. Full Name (Last, First, Middle Initial)**  
Steven M Chasse

Mailing Address

2715 W. 66th Street South

 City State Zip Code  
Newton IA 50208

 Purpose of Disbursement:  
Reimbursement/Mileage
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date  /  / 

Transaction ID: D2335H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="34.60"/>		<input type="text" value="61.52"/>		<input type="text" value="96.12"/>

**C. Full Name (Last, First, Middle Initial)**  
DSM Water Works

Mailing Address

5661 Fleur Dr

 City State Zip Code  
Des Moines IA 50321-2841

 Purpose of Disbursement:  
Water & Sewer Service
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date  /  / 

Transaction ID: D2339H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="35.18"/>		<input type="text" value="62.55"/>		<input type="text" value="97.73"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="194.77"/>		<input type="text" value="346.29"/>		<input type="text" value="541.06"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 225 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Brad T Frevert

Mailing Address

2801 Woodland Ave

City	State	Zip Code
West Des Moines	IA	50266-2031

 Purpose of Disbursement:  
 Reimbursement/Mileage

Category/Type

 Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	4

Transaction ID: D2387H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.70		116.82		182.52

**B. Full Name (Last, First, Middle Initial)**  
 Brad T Frevert

Mailing Address

2801 Woodland Ave

City	State	Zip Code
West Des Moines	IA	50266-2031

 Purpose of Disbursement:  
 Reimbursement/Mileage

Category/Type

 Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	3	/	2	0	0	4

Transaction ID: D2480H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
134.03		238.30		372.33

**C. Full Name (Last, First, Middle Initial)**  
 Johnson County Democratic Central Comm

Mailing Address

917 Bowery Street

City	State	Zip Code
Iowa City	IA	52240

 Purpose of Disbursement:  
 Rent

Category/Type

 Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	4

Transaction ID: D2585H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.00		320.00		500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
379.73		675.12		1054.85

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 226 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
Qwest 515-244-7292

Mailing Address

PO Box 12480

City	State	Zip Code
Seattle	WA	98111-4480

Purpose of Disbursement:  
TelephonesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 05 / 2004

Transaction ID: D2795H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
643.35		1143.75		1787.10

**B. Full Name (Last, First, Middle Initial)**  
Tri-City Electric

Mailing Address

10520 Hickman Rd

City	State	Zip Code
Des Moines	IA	50325-3712

Purpose of Disbursement:  
Telephone rentalCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 05 / 2004

Transaction ID: D2796H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
708.05		1258.78		1966.83

**C. Full Name (Last, First, Middle Initial)**  
Robert L Hamill

Mailing Address

3407 Grand Ave Apt 122

City	State	Zip Code
Des Moines	IA	50312-4111

Purpose of Disbursement:  
Reimbursement/TravelCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 31 / 2004

Transaction ID: D2261H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.88		5.12		8.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1354.28		2407.65		3761.93

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 227 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Robert L Hamill

Mailing Address

3407 Grand Ave Apt 122

City State Zip Code  
 Des Moines IA 50312-4111

Purpose of Disbursement:  
 Reimbursement/Travel

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date MM / DD / YYYY  
 08 / 13 / 2004

Transaction ID: D2313H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

21.96

39.06

61.02

**B. Full Name (Last, First, Middle Initial)**  
 Nicolas J Ferre

Mailing Address

824 Whitman Ct

City State Zip Code  
 Libertyville IL 60048-1667

Purpose of Disbursement:  
 Reimbursement/Mileage

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date MM / DD / YYYY  
 08 / 13 / 2004

Transaction ID: D2299H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

192.07

341.48

533.55

**C. Full Name (Last, First, Middle Initial)**  
 Nicolas J Ferre

Mailing Address

824 Whitman Ct

City State Zip Code  
 Libertyville IL 60048-1667

Purpose of Disbursement:  
 Reimbursement/Mileage

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date MM / DD / YYYY  
 08 / 31 / 2004

Transaction ID: D2361H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

46.76

83.13

129.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

260.79

463.67

724.46

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 228 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**

Justin R Buell

Mailing Address

3249 Jackson St

City

State

Zip Code

San Francisco

CA

94118-2016

Purpose of Disbursement:  
Reimbursement/MileageCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Activity or Event Identifier:  
Administrative

Date 08 / 31 / 2004

Transaction ID: D2307H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

18.57

33.04

51.61

**B. Full Name (Last, First, Middle Initial)**

Justin R Buell

Mailing Address

3249 Jackson St

City

State

Zip Code

San Francisco

CA

94118-2016

Purpose of Disbursement:  
Reimbursement/MileageCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Activity or Event Identifier:  
Administrative

Date 08 / 13 / 2004

Transaction ID: D2349H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

38.62

68.67

107.29

**C. Full Name (Last, First, Middle Initial)**

Christopher D Bonfig

Mailing Address

320 E Burlington St Apt 8

City

State

Zip Code

Iowa City

IA

52240-1670

Purpose of Disbursement:  
Reimbursement/MileageCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Activity or Event Identifier:  
Administrative

Date 08 / 13 / 2004

Transaction ID: D2297H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

15.27

27.16

42.43

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

72.46

128.87

201.33

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 229 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Qwest 319-337-9163

Mailing Address

1314 Douglas St FI 14

City	State	Zip Code
Omaha	NE	68102-1816

Purpose of Disbursement:  
TelephonesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 03 / 2004

Transaction ID: D2303H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

18.00

32.00

50.00

**B. Full Name (Last, First, Middle Initial)**  
 Qwest 319-337-9163

Mailing Address

1314 Douglas St FI 14

City	State	Zip Code
Omaha	NE	68102-1816

Purpose of Disbursement:  
TelephonesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 03 / 2004

Transaction ID: D2278H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.92

14.08

22.00

**C. Full Name (Last, First, Middle Initial)**  
 Qwest 319-337-9163

Mailing Address

1314 Douglas St FI 14

City	State	Zip Code
Omaha	NE	68102-1816

Purpose of Disbursement:  
TelephonesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 05 / 2004

Transaction ID: D2780H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

447.26

795.14

1242.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

473.18

841.22

1314.40

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 230 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**

Ben J Brady

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

## Mailing Address

2707 Hampton St

City

State

Zip Code

Ames

IA

50010-7132

Purpose of Disbursement:  
Reimbursement/MileageCategory/  
TypeActivity or Event Identifier:  
Administrative

Date 08 / 13 / 2004

Transaction ID: D2413H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

81.77

145.39

227.16

**B. Full Name (Last, First, Middle Initial)**

Matthew D Deferranti

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

## Mailing Address

1406 46th St

City

State

Zip Code

Des Moines

IA

50311-2429

Purpose of Disbursement:  
Reimbursement/Office SuppliesCategory/  
TypeActivity or Event Identifier:  
Administrative

Date 08 / 31 / 2004

Transaction ID: D2635H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

214.38

381.14

595.52

**C. Full Name (Last, First, Middle Initial)**

Qwest Business

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

## Mailing Address

PO Box 856169

City

State

Zip Code

Louisville

KY

40285-6169

Purpose of Disbursement:  
TelephonesCategory/  
TypeActivity or Event Identifier:  
Administrative

Date 08 / 05 / 2004

Transaction ID: D2352H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

42.35

75.29

117.64

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

338.50

601.82

940.32

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 231 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Mediacom

Mailing Address

6300 Council St NE

City

State

Zip Code

Cedar Rapids

IA

52402-5853

 Purpose of Disbursement:  
 Cable TV Service
Category/  
Type
 Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 05 / 2004

Transaction ID: D2358H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

43.96

78.16

122.12

**B. Full Name (Last, First, Middle Initial)**  
 Pitney Bowes

Mailing Address

PO Box 856390

City

State

Zip Code

Louisville

KY

40285-6390

 Purpose of Disbursement:  
 Mailing Equipment
Category/  
Type
 Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 30 / 2004

Transaction ID: D2309H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

19.05

33.87

52.92

**C. Full Name (Last, First, Middle Initial)**  
 Pitney Bowes

Mailing Address

PO Box 856390

City

State

Zip Code

Louisville

KY

40285-6390

 Purpose of Disbursement:  
 Mailing Equipment Lease
Category/  
Type
 Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 30 / 2004

Transaction ID: D2714H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

317.49

564.43

881.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

380.50

676.46

1056.96

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 232 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Sandler, Reiff and Young

Mailing Address

50 E St SE Ste 300

City State Zip Code  
 Washington DC 20003-2620

Purpose of Disbursement:  
 Legal retainer

Category/  
 Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 1 5 / 2 0 0 4

Transaction ID: D2504H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
144.00		256.00		400.00

**B. Full Name (Last, First, Middle Initial)**  
 Jesse G Harris

Mailing Address

975 Applewood Ln

City State Zip Code  
 Waukee IA 50263-8267

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
 Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 1 3 / 2 0 0 4

Transaction ID: D2432H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.59		161.05		251.64

**C. Full Name (Last, First, Middle Initial)**  
 Jesse G Harris

Mailing Address

975 Applewood Ln

City State Zip Code  
 Waukee IA 50263-8267

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
 Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 3 1 / 2 0 0 4

Transaction ID: D2397H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.68		138.10		215.78

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
312.27		555.15		867.42

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 233 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 USPS

Mailing Address  
 1165 2nd Ave

City State Zip Code  
 Des Moines IA 50318-9704

Purpose of Disbursement:  
 Bulk Mail Permit Deposit

Category/  
 Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 1 0 / 2 0 0 4

Transaction ID: D2587H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.00		320.00		500.00

**B. Full Name (Last, First, Middle Initial)**  
 Byers Mowing Service

Mailing Address  
 5661 Fleur Dr

City State Zip Code  
 Des Moines IA 50321-2841

Purpose of Disbursement:  
 Lawn Care

Category/  
 Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 1 3 / 2 0 0 4

Transaction ID: D2342H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.00		64.00		100.00

**C. Full Name (Last, First, Middle Initial)**  
 Deaf Action Center

Mailing Address  
 PO Box 1501

City State Zip Code  
 Des Moines IA 50306-1501

Purpose of Disbursement:  
 Signing for State Convention

Category/  
 Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date M M / D D / Y Y Y Y  
 0 8 / 0 5 / 2 0 0 4

Transaction ID: D2637H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
216.00		384.00		600.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
432.00		768.00		1200.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 234 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
Occasions Caterers

Mailing Address

5458 3rd St NE

City

State

Zip Code

Washington

DC

20011-6316

Purpose of Disbursement:  
Food and BeverageCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 05 / 2004

Transaction ID: D2437H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

97.81

173.89

271.70

**B. Full Name (Last, First, Middle Initial)**  
Alison N Kurth

Mailing Address

1933 N Marquette Street

City

State

Zip Code

Davenport

IA

52804-2159

Purpose of Disbursement:  
Reimbursement/TravelCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 13 / 2004

Transaction ID: D2290H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

13.60

24.20

37.80

**C. Full Name (Last, First, Middle Initial)**  
The Insurance Specialist

Mailing Address

100 E Euclid Ave Ste 117

City

State

Zip Code

Des Moines

IA

50313

Purpose of Disbursement:  
Insurance PremiumCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 08 / 05 / 2004

Transaction ID: D2294H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14.39

25.60

39.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

125.80

223.69

349.49

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 235 / 239  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
Christine Brandt

Mailing Address

311 S 52nd St

City

State

Zip Code

Omaha

NE

68132-3543

Purpose of Disbursement:  
Reimbursement/TravelCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Activity or Event Identifier:  
Administrative

Date 08 / 24 / 2004

Transaction ID: D2350H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

39.89

70.93

110.82

**B. Full Name (Last, First, Middle Initial)**  
Pitney Bowes CC

Mailing Address

5661 Fleur Dr

City

State

Zip Code

Des Moines

IA

50321-2841

Purpose of Disbursement:  
Mailing Equipment LeaseCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Activity or Event Identifier:  
Administrative

Date 08 / 03 / 2004

Transaction ID: D2713H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

317.49

564.43

881.92

**C. Full Name (Last, First, Middle Initial)**  
Verizon 507923725

Mailing Address

PO Box 790406

City

State

Zip Code

Saint Louis

MO

63179-0406

Purpose of Disbursement:  
TelephonesCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Activity or Event Identifier:  
Administrative

Date 08 / 19 / 2004

Transaction ID: D2348H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

37.89

67.38

105.27

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

395.27

702.74

1098.01

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 236 / 239  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
 Verizon 507923725

Mailing Address

PO Box 790406

City	State	Zip Code
Saint Louis	MO	63179-0406

Purpose of Disbursement:  
 Telephones

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	5

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2356H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.79		77.85		121.64

**B. Full Name (Last, First, Middle Initial)**  
 Webster County Democratic Central Comm

Mailing Address

3 Johnson Pl

City	State	Zip Code
Fort Dodge	IA	50501-4113

Purpose of Disbursement:  
 Rent

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2340H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.00		64.00		100.00

**C. Full Name (Last, First, Middle Initial)**  
 Heather M Hargreaves

Mailing Address

1408 Locust St

City	State	Zip Code
Des Moines	IA	50309-3014

Purpose of Disbursement:  
 Reimbursement/Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Date 

M	M
0	8

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	4

Transaction ID: D2375H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.82		97.46		152.28

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
134.61		239.31		373.92

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE	237 / 239
FOR LINE 21a OF FORM 3X	

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**

Clint A Birkenholtz

Mailing Address

3386 Hunter Ave

City

State

Zip Code

Newton

IA

50208-8656

Purpose of Disbursement:  
Mileage ReimbursementCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Activity or Event Identifier:  
AdministrativeDate 

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	3	/	2	0	0	4

Transaction ID: D2382H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

64.76

115.14

179.90

**B. Full Name (Last, First, Middle Initial)**

Clint A Birkenholtz

Mailing Address

3386 Hunter Ave

City

State

Zip Code

Newton

IA

50208-8656

Purpose of Disbursement:  
Mileage ReimbursementCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402454.52

Activity or Event Identifier:  
AdministrativeDate 

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	4

Transaction ID: D2347H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

37.42

66.53

103.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

102.18

181.67

283.85

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

26888.78

47803.70

74692.48

**SCHEDULE L (FEC Form 3X)**

238 / 239

**AGGREGATION PAGE: LEVIN FUNDS**Transaction ID: **SchedL298**NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTYNAME OF ACCOUNT  
Levin Designations & Expenditures

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	10500.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	10500.00
2. OTHER RECEIPTS.....	0.00	5000.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	15500.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	70.09
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	70.09
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	25329.91	9900.00
8. RECEIPTS..... (from Line 3)	0.00	15500.00
9. SUBTOTAL..... (Add Lines 7 and 8)	25329.91	25400.00
10. DISBURSEMENTS..... (From Line 6)	0.00	70.09
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)		25329.91

Form/Schedule: **F3XA**

Transaction ID:

Please note that due to an internal audit of 2004 we are making amendments to all our reports through 2007. The contribution from the Democratic Governor's Club was originally deposited into the Non-Federal Account, and mistakenly reported on the September Monthly.

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